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ABSTRACT

Specific characteristics of a quality day care center are identified through a survey of parents, teachers, and directors utilizing or working in day care centers. The introduction to this descriptive research study offers background information on the history of the child care movement in America and a review of related research projects. A questionnaire, composed of open-ended, rank, and selection questions, was developed to examine five major areas: center; program; staff; emergency, health and food procedures and policies; and parental role and types of evaluation. The sample was composed of (1) a random selection of directors of large and small centers in Denver; (2) parents who were utilizing child care services when surveyed (balanced for race, ethnic group and income level); and (3) teachers in the same day care centers which parents were using. Comparisons were made among the large groups: parents, teachers and directors; types of centers surveyed; parent-cooperative, private-franchise, and Federal-State funded centers; and income levels. Results, conclusions and recommendations are listed. Appendices make up approximately one-half of the document. Included are the questionnaire used and tabulations of the responses of each group surveyed. (JMB)

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A STUDY IDENTIFYING THE COMPONENTS OF A QUALITY CHILD CARE CENTER

BY
SANDRA J. PANETTA

A RESEARCH REPORT
SUBMITTED IN FULFILLMENT OF THE REQUIREMENTS IN

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ANALYSIS OF INFLUENCES AND CRITICAL VARIABLES IN QUALITY CHILD CARE

COLLEGE OF EDUCATION
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INTRODUCTION

Statement of the Problem

The problem to be dealt with in the study is the lack of a precise definition for the term quality child care. The primary purpose of this descriptive research will be to identify the *aspects of a quality child care center*. A secondary purpose, although it is not being measured, is to force the attention of parents, teachers and directors on the various components of a child care center.

Significance of the Problem

To understand fully the implications derived from the fact that a precise definition for quality child care does not exist, it is important for one to become aware of the following factors:

1. History of licensing of child welfare institutions.
2. Awareness of the social, political and economic forces shaping child care in America.
3. Procedures for regulating child care centers which are not licensing.
4. No national or state models exist to define the fire, health and safety regulations of child care centers.
5. No national child care models exist to define staff qualifications and regulations.
6. State rules and regulations for child care centers establish a *baseline* quality model.

A brief history of child care in America will illustrate the nature of *existing* licensing procedures as well as the various political, social and economic forces which operated and are still operating in determining the type of child care services being provided for America's children.

During the Civil War the Federal government provided money to support child care centers for the children of war widows (Philadelphia Day Nursery Assn.). Clearly, this displays an early attempt on the part of the government to care for children who lacked fathers, i.e., lacked a bread-winner. The only existing agency prior to this time, was the New York Nursery and Child's Hospital (1854) which provided child care facilities for working mothers.[1]

New England was the first state to attempt regulation of child welfare programs. In 1863 it established the "Board of Charities" whose primary purpose was to "inspect and report on certain types of child care facilities."[2] Pennsylvania was the first state to pass a licensing law (1885) for child care institutions.

During the 1890's day nurseries flourished. They were established under philanthropic auspices and their primary purpose was to remove children from residential care; standards for these nurseries were first proposed in 1898 by the National Federation of Day Nurseries.[3] Actual improvement occurred mainly in the 1920's when nursery schools were established at various universities for the study of Child Development and Early Childhood Education.

The entrance of child psychologists, teachers, doctors and nurses altered the focus of early childhood care which formerly was the concern of socially minded individuals, i.e., early social workers. Research now became the primary concern and the social-emotional development of the child was the banner being flaunted. The children found at university nursery schools and in the nursery school movement came from the middle-class. This fact can be viewed as one of the forces responsible for the difference in qualifications between the nursery school director and teacher and those of her child care counterparts. An example will demonstrate the point. Presently the State of Michigan makes the following distinction between the directors of nursery schools and child care centers:

> The head teacher or person in charge of programming of the _nursery school_ shall meet the educational qualifications as determined by the Michigan Department of Public Instruction for nursery school assignment (Certified as an Elementary Education teacher).
>
> The director or person in charge of a day care center shall have a _minimum_ of two years of study at the college level.[4]

A complete table listing the educational requirements for directors, teachers and operators of child care centers in the United States can be found in Appendix A.

The Federal government entered the field of child care once again when in 1933 it appropriated funds, through the Federal Emergency Relief Administration to establish nursery centers for over 75,000 needy children.[5] The major purposes of the grant were to provide jobs for unemployed teachers and nurses and to care for the children. Albert Shanker is advocating a similar move today. He is advocating that preschool and child care services be offered as an extension of public schools, thus utilizing the surplus of unemployed teachers in staffing these facilities.

The advent of World War II caused women to leave their homes and join the labor force. Child care centers were established to accommodate their children. Most of these centers were "sponsored and supervised by state and local departments of education."[6] The end of the war terminated these facilities in all but a few cities: New York and Philadelphia. Today the States' Departments of Social Services are responsible for regulating and sponsoring child care programs in America.

In 1958 the National Committee for the Day Care of Children (today known as the Day Care and Child Development Council) was established. It elected to bring the issue of child care to the attention of the Federal government. The first national conference on day care was held in the spring of 1960 just at about the time when the Department of Health, Education and Welfare and the Women's Bureau of the Department of Labor released the findings of a study dealing with day care. It recommended the resumption of funding of child care centers by the Federal government; it was also instrumental in causing the Children's Bureau to become involved in the licensing of child care centers.

Presently, the United States has some type of procedure for licensing child care centers in all states except Mississippi (voluntary) and Idaho (overturned by court action).[7] Federal Interagency Day Care Requirements were established in 1968 and apply to a variety of programs (see Appendix A). These rules and regulations are presently in the process of proposed changes under Title XX of the Social Security Act (see Appendix A). Furthermore, Rep. J. Brademas

(D.-Ind.) and Sen. W. Mondale, (D-Minn.) are in the process of proposing a bill (H.R. 2966) (S.B. 626) under the Child and Family Services Act, 1975, which would authorize the expenditure of $1.8 billion over the next three years. The services which will be provided under the bill are:

1. Day care and preschool.
2. Medical care for mothers in order to reduce preventable birth defects.
3. Family counseling.
4. Health care and school food programs.[8]

The amount of money to be spent on child care, according to this bill alone, necessitates the existence of an acceptable definition of quality child care. An acceptable definition could provide insight for the type of centers to be established to meet the varied needs of America's children. The problem of defining quality child care becomes extremely complex when one examines the groups involved in the passage of the 1971 Comprehensive Child Care Bill (vetoed by former President Nixon) and now working for the passage of the Mondale-Brademas Bill. The following groups are involved in this political issue:

1. National Parent Federation.
2. DCCDCA (Day Care and Child Development Council of America).
3. National Welfare Rights Organization.
4. National Association for the Development of Community Development.
5. National Association for the Education of Young Children.
6. American Federation of Teachers.
7. Private Child Care Associations.
8. National Organization of Women.

The above list is not inclusive but it does provide a perspective of the diverse groups involved in child care.

Furthermore, child care has become a political issue because it is no longer a need for only children from lower socio-economic levels. Women from the middle-class population are now choosing to work, not because of financial need, but because of a personal preference to work. Child care institutions may also provide direct an indirect jobs for diverse professions in our society: child psychol gists, nurses, diagnostic teachers, teachers, teacher's assistants, dieticians, social workers, child development experts, maintenance people, cooks, architects, contractors, construction personnel, educational equipment producers, etc. The group with the most political power could feasibly determine where and how the monies will be allocated. Presently the Private Child Care Organizations comprise the largest single providers of child care programs in the United States. They are involved in a battle with the American Federation of Teacher's President, Albert Shanker, who would like public schools to be the major sponsors for child care and preschool services in America.

Child care is also a political issue because it has been viewed by some as a form of intervention for children and families encountering stress. It can be used as a mechanism for holding families together instead of placing children in foster homes or residential care.

In the midst of the controversy regarding the need for child care, best procedure for sponsorship and implementation, and probable jobs for various people, it is important to remember that:

1. No _models_ exist to uniformly define the actual physical plant at the national level.

2. No specific uniform levels exist for staff requirements and qualifications.

3. State rules and regulations define child care at the _baseline_ level.

4. No concrete guide exists for allocating funds to existing centers on the basis of an evaluation of their ability to service children and families.

Certain procedures for controling child care centers other than through licensing do exist. They are effective and easily implemented, but do not exemplify a definition for quality child care. The techniques for regulating day care which are not licensing are:

1. _Direct administration_: These are day care services publicly funded and operated; for example, by the state through their welfare departments. They do not require licensing since they are supposed to be self-monitoring, with the operating agency answerable to elected officials.

2. _Direct regulations_: Full or partial funding from public monies, e.g., Head Start (which has just recently been ordered to follow licensing procedures for child care centers); uniform federal guidelines can be laid down for all operating branch agencies to follow or lose their budget.

3. _Funding standards_: Center's ability to maintain certain standards, e.g., Federal Interagency Requirements, affects the amount of funds allocated to that center (see Appendix B). These standards often differ from those established by the States; most often they lower adult/child ratios.

4. _Proposal requests and accounting systems_: Ability to obtain additional Federal funds often rests on the organization's proposal writing skills. Furthermore, Federal funding entails much analysis of the organizations books.

5. _Zoning_: It is a procedure which allows the local zoning board (which represents the city, town or county) to determine how local land will be used. (Often it can be used to prevent the establishment of child care centers in badly needed residential and business areas; the main

reason being the amount of noise generated by children. In Detroit, Michigan the zoning ordinances have not prevented the saturation of various areas with an abundance of child care centers; thus certain parts of the city lack these facilities while others are overly populated).

6. Fire, Sanitation and Building Codes: The meeting of specific codes is a precondition for a license. The findings of a recent study concerning this aspect indicated that: day care facilities are not usually specifically defined or classified in state or local regulations applied specifically to day care facilities by inspectors. (Thus, inspectors from the same department can and do demand different changes in the building's structure).

7. Incorporation: Procedures for incorporation as a profit or nonprofit agency are extremely legalistic and time consuming, yet an agency cannot be licensed until this factor has been resolved.[9]

An examination of various definitions for day care services will illustrate the need for a precise definition acceptable to all parties involved.

The following definition is espoused by the Women's Bureau of the U. S. Department of Labor:

> A day nursery or day care center has as its primary function the provision of group care and supervision of supplemental parental care during the day because the children's parents are unable to care for them due to employment, sickness or for some other reason.[10]

The Bureau emphasizes the fact that it is the main function of the center to provide "supervision" and "supplemental parental care;" therefore, the center is not viewed as an agency which provides educational functions. It is viewed as an agency which cares for children while their parents work or are incapacitated due to illness or inability to function totally in the role of a parent. (Some states are eliminating these two conditions for child care services in order to decrease spending by the Department of Social Services: Michigan and Colorado are two of those states).

The United Nation's definition of child care states:

> ...an organized service for the care of children away from their own homes during some part of the day when circumstances call for normal care in the home to be supplemented.[11]

This definition is based on the theory of day care services as a supplement to but not as a substitute for parental care because of various reasons; it also views child care as a service being performed during "some part of" a twenty-four hour day but not a total of a day. The definition does not deal with providing educational services. As a matter of fact, neither definition states that the child care agency shall deal with the total development of a child--nutritional, emotional, social, mental and educational. Perhaps since it is assumed that the agency is operating to supplement parental care, it will choose to concern itself with the total development of a child. But then one must remember that in the Bureau of Labor's definition, they elected to use the words care and supervision and not care, supervision and development; the exclusion may have been a mistake.

The Federal and State government are more concerned about requiring that child care agencies (many of which are business ventures established for the major objective of developing a profit) deal with the total development of a child and that is why requirements were formulated. The Federal government has developed a list of Federal

Interagency Day Care Requirements, which agencies servicing children whose tuition is paid jointly by the Federal and State government, must comply with. (Presently subject to proposed changes---see Appendix A).

The Federal government defines day care services in the following fashion:

> Day care services---comprehensive and coordinated sets of activities providing direct care and protection of infants, preschool and school-age children outside of their own homes during a portion of a 24-hour day. Comprehensive services include, but are not limited to, educational, social, health, and nutritional services and parent participation. Such services require provision of supporting activities including administration, coordination, admissions, training and evaluation.[12]

Note that this definition states that an agency shall not be limited only to dealing with the child's total development and parental participation but also concern itself with administering, coordinating and admitting procedures for child care. The agency also must train and evaluate its employees. Thus, there is an enormous difference between this definition and that of the first two agencies. The child care institution assumes the responsibility of dealing with the child's total development, educating and assisting parents (functions which clearly belong to the Department of Social Services financially and administratively) and training and evaluating staff.

The significance of the problem has been demonstrated; it now remains for the study to attempt to define quality child care by identifying aspects of the theoretical center.

Assumptions and Limitations

The following assumptions will be operating throughout this paper:

1. Quality child care does not have to imply one comprehensive program model.
2. Quality child care can be defined in terms of specific characteristics.
3. These characteristics are observable settings, activities, materials, staff behavior, adult-adult interactions and child-adult interactions.
4. Parents, directors and teachers can identify these aspects of a child care center.
5. Parents, teachers and directors will participate in the survey.
6. A definition of quality child care above the baseline level is needed.
7. The characteristics of a quality child care center can be identified through the use of a questionnaire.
8. The parents, directors and teachers understood the terminology of the questionnaire.
9. The surveyed individuals were sincere in their responses to the questions asked.
10. Precise definition of quality child care can influence decisions for financial appropriations.
11. A precise definition of quality child care can guide the writing of rules and regulations for child care centers.

The following limitations must be considered when dealing with the data:

1. The researcher had no direct access to parents.
2. The researcher had to rely on the enthusiasm of the center's directors and teachers when requesting parental input.

3. Financial expendency prevented the enclosure of a stamped self-addressed envelope with the parents' questionnaires.

4. Percentage of return was not as high as anticipated.

5. The parents had to take the questionnaire home and fill it out instead of completing it while at the center.

6. The parents were coming home from work; therefore they were tired, had other priorities, and preferences for time expenditures.

7. The terminology used in the questionnaire may have been too research-oriented for some individuals.

8. Some of the people may not have felt comfortable asking about specific questions about the questionnaire.

9. Reluctance to answer the questionnaire honestly because of the adverse effect it might have on their center, e.g., possible increase in tuition.

10. General reluctance on the part of parents, teachers, and directors to fill out questionnaires because of the multitude of activities they are asked to participate in.

11. Respondent's general concern on the basis of previous experience that results and benefits of the study will not be shared with them.

12. Probability that the majority of respondents were women.

13. Lack of knowledge of how the questionnaire was directly presented to the parents and teachers by the directors.

Definition of Terms

Parent refers to biological, adoptive, extended family member or caregiver assigned the responsibility of providing for all of the child's needs.

Family unit refers to two-parent biological, single-parent biological, single or two parent adoptive, extended and communal units.

Child Care Center means a facility, by whatever name known, which is maintained for the whole or part of a day for the care of five or more children under the age of 16 years, and not related to the owner, operator, or manager thereof, whether such facility is operated with or without compensation for such care, and with or without stated educational purposes. The term shall include facilities commonly known as "day care centers," "day nurseries," "nursery schools," "kindergartens," "preschools," "play groups," "day camps," "summer camps," "centers for mentally retarded children," and those facilities which give 24-hour care for dependent and neglected children; and shall include those facilities for children under the age of six years, with stated educational purposes, operated in conjunction with a public, private, or parochial elementary school system of at least six grades; provided further, that the term "kindergarten" shall mean any facility providing an educational program for children prior to their entrance to the first grade, whether such facility is called a kindergarten, nursery school, preschool, or by another name. The term shall not include any facility licensed as a family care home under the provisions of this article. (119-2(3) C.R.S. 1963, as amended.[13] (Concerned in this study were centers accommodating children aged 2½ to 6 years).

Large day care center is a center which provides less than 24-hour care for 13 or more children between the ages of 2½ to 16 years.[14]

Small day care center is a center which provides less than 24-hour care for 7-12 children between the ages of 2 to 16, with no more than 4 children under the age of 2½ in attendance at any one time.[15]

(The type of center to be defined will deal with children aged 2½ to 6 years; the questionnaire was designed with this age group in mind).

Infant-Toddler Center refers to an agency which provides less than 24 hour care for children aged 6 weeks to 2½ years.

Parent-Cooperative refers to a child care center established, organized and directed by a group of parents.

Home Care Center for Infant-Toddler Care refers to a home providing care and training for a child or children, not related to the caretaker, aged 6 weeks to 2½ years, for more than two full consecutive days on a regular weekly basis. A full day is seven or more hours. The home care center would be located in the child's immediate, residential neighborhood.

Professionaly Trained Child Sitter refers to trained (education and experience), licensed sitters who will come to a family's home upon request.

Nonprofit-Community Child Care Center meets the stated definition for a child care center and functions as an adjunct of the community. It calls upon and receives the resources of varied professionals in the community. It can be funded as public schools presently are; it may or may not be a part of the public school system.

Private Large Day Care Corporations are centers which are part of a National franchise.

Primary Function of the Center refers to the major reason for operating the center.

Educational Goals refer to the type of behavioral changes the center wishes to facilitate.

Adult/Child Ratio refers to the number of adults (including teachers, teacher assistants, volunteers, parents, educational director and center director) present at the center in relation to the total amount of children.

Center Director refers to the individual responsible for the administrative tasks as well as evaluation and selection of educational goals.

Educational Director refers to the individual responsible for implementing an educational program.

Teacher refers to the individual directly responsible for the child the largest percentage of the time the child is at the center.

Teacher's Assistant is the person who aides the teacher in any manner possible.

Professional refers to one who engages in a learned calling or sport for pay.[16]

Policies refer to established, managerial decisions for specific situations.

Procedures refer to established steps for carrying out the policies.

Provide implies the ability to supply or arrange for the implementation of certain services.

Evaluation is defined in terms of:

1. Degree of implementation of a specific program model. (Providing one had been selected).
2. Process-behaviors of staff and children in the child

care setting.

3. Product-instruments which measure end product facilitated by the center.[17]

Cooperative Parental Role defines such behavior as acceptance of the center's established purposes, goals, policies, procedures and method of operation; assisting in activities; volunteer; and teacher of their child while at home.

Supportive Parental Role defines such behaviors as those listed in the cooperative definition plus the use of parents as resource people, parental construction of materials, arranging and directing fund raising events, and training of the parent as a worker in the center.

REVIEW OF RELATED LITERATURE

Mattick and Perkins have constructed a lengthy and detailed observation instrument to be used when evaluating the learning environment of a child care center. The instrument divides the learning environment into four areas: physical setting---its impact upon the children and staff; program content---its implied goals; teaching strategies in terms of program implementation and range of effectiveness; and the social-emotional climate---its impact on the children, staff and parents.[18]

The areas are then divided into variables which are identified by specific questions. The observer does not merely place a mere yes or no next to the question; she is encouraged to describe a specific situation. The observation list provides insights into aspects of a child care center which could contribute to its quality, but the authors fail to define quality or good child care. The observer must construct her own model child care center.

The authors do state, however, that the goals of a day care center depend on and should be guided by the following factors:

1. Children.
2. Family.
3. Community being served.

Furthermore, the authors suggest the center should operate within the following context:

1. Assisting children in becoming competent learners and determining the mode: active or passive learning.

2. Providing family related experiences:

    a. Cross-aged grouping.
    b. Contact with male and female staff.
    c. Privacy.
    d. One-to-one experience.
    e. Time for the child to pursue his own interests.

3. Family-center interaction:

    a. Center functions to provide support during family-crisis situations.
    b. Clear distinction between the parent's and the center's responsibilities.
    c. Value the parent's perspectives.[19]

While the instrument does not identify the characteristics of a quality child care center; it does provide information about the aspects of the center which may be a component of quality child care. Many of these aspects are examined in the context of the questionnaire which is used as a data gathering instrument in this study.

The Office of Child Development conducted a study in 1971 to describe licensing requirements, state licensing procedures and licensing steps required of applicants in each of 50 states; identify those factors that facilitate or inhibit the day care licensing process; and describe and analyze the range and variation of local government participation in the licensing process.[20] A preliminary survey of the licensing rules, regulations and procedures being used by the 50 states comprised the first phase of the study. Upon the basis of this survey, six sample states were selected for an in-depth study. The six states were: California, Colorado, Michigan, Missouri, Pennsylvania and Virginia.

This study provided the Office of Child Development with information concerning the variety of management procedures, range of regulations, national geographic spread of regulations, range of stringency of requirements and cost impact and the wide range of urban and rural situations.[21]

The study came up with the following findings (See Appendix A for detailed list of findings):

1. Licensing of centers is voluntary in Mississippi and the center licensing regulation has been overturned by court action in Idaho.

2. In a few states requiring licenses, there are large gaps in average where licensing is not mandatory for all cities and counties.

3. Except for the state licensing regulations, day care facilities are not usually specifically defined or classified in state or local regulations applied to day care facilities by inspectors. Zoning, fire safety, health and building code requirements are usually not coordinated with state day care licensing regulations.

4. Local regulations for fire safety, health, and building usually increase in stringency as the population density increases. Both the number of separate regulations to be met and the sophistication of their requirements are highest in urban metropolitan areas. (Michigan came across similar findings in 1974 while the State was involved in rewriting the Minimum Rules and Regulations for Nursery Schools and Child Care Centers).

5. Although there are many similarities, no two states, cities, or counties follow the same procedures or interpret regulations in the same way.

6. The greatest problem of coordination cited by the state licensing authorities were in dealing with the state fire marshal, local fire marshals, local health officers, and the state health officers---in that order.

7. The most frequent reasons given by the state for denying licenses to initial license applicants were that

the applicants lacked qualified staff, failed to comply with fire codes, or had uncorrectable building violations.

8. The state licensing agencies indicated that the best ways of speeding up the licensing process, without loss of effective program control, are to increase the licensing staff, improve state administrative procedures, reorganize local staff and develop more written state requirements, codes, and guidelines specifically designed for day care.[22]

The researchers drew many conclusions (see Appendix A) but the following two are significant for this paper:

1. State and local agency standards for day care licensing have been developed by different people under different circumstances for different reasons, and very often without consideration of parallel or conflicting requirements of other agencies. This piecemeal approach, so often used in the past, is simply too inefficient and costly to be allowed to continue unchecked...The applicant must resolve the conflicting requirements to the agreement of all agencies requiring compliance with their rules.

2. On the basis of statements by the licensing agencies in all six states visited in the follow-up survey, a major concern of all licensing agencies is the lack of strong legal teeth they need to revoke the license of a "bad" day care facility and keep the facility closed.[23]

The recommendations of the study lead one to believe that the writers perceive the licensing mechanism as the most feasible tool for insuring quality child care. One must realize, however, that the degree of "quality" will be baseline since it is the responsibility of the states to establish minimal rules and regulations.

A recent article in the Detroit News (April, 1975) dealt with the elusive concept of quality child care. A variety of people were interviewed: licensing consultants from the Department of Social Services, Program Specialist from the Wayne County Child Care Council, college instructors and parents.

The state officials and experts felt "that all the license guarantees is mental and physical safety."[24] Various people working in fields which necessitated visits to child care centers used unfavorable terminology when describing centers. Furthermore, no precise definition for the concept quality child care could be given.

A Child Development instructor stated that experts have an idea of what good child care is but often run into problems with parents. She identified the following areas as components of quality care:

1. Program which encourages exploring, curiosity, and flexibility.
2. Key to the program's excellence or lack of it---no matter how much expensive equipment is available---is the staff.

Yet, the problem of quality staff is compounded by the fact that states cannot determine who should establish the requirements for the child care teacher's certification: Department of Social Services or the Department of Education (see Appendix A for a listing of qualifications for directors and teachers of child care centers in America).

During 1970-72 a national study of day care services in America was conducted by the National Council of Jewish Women. Their findings indicated that:

1. 38% of the nonprofit centers studied were good or superior.
2. 51% were fair.
3. 50% of the centers operated for profit were poor.[26]

A pamphlet entitled What is Good Day Care, published by the Children's Bureau, deals with definitions, standards and activities of good day care. It presents a list of characteristics identifying good day care but does not explain how these factors were selected. The following points are listed as aspects of good day care:

1. It is part of a well-rounded service program.
2. It is run by trained, professional people.
3. Its centers and homes are licensed.
4. It offers counseling---dependable guidance for families that need help.
5. It is care that reinforces the family's own care:
    a. Helping parents to shoulder their responsibilities.
    b. Giving children needed attention, affection and stability.
    c. Holding the family together.[27] (ED 069 392).

These are aspects which parents are supposed to look for when selecting a center for their child. It is important to remember, however, that the reference to "trained, professional people" is not supported by the existing requirements established by states for the directors and teachers of child care centers.

An article authored by Jones and Prescott questions the assumption that group day care can provide all the needed experiences for preschoolers. It proceeds to deal with the reality of the need for day care for the children of working parents. Their statements are based on the differences found while studying 100 different centers in Los Angeles.

The article identifies specific characteristics observed in the centers. One of the major differences noticed between centers was the teacher's behavior and their style of presenting activities. Some centers stressed teacher-directed activities and a controlled atmosphere while others supported spontaneous play and managed social relationships.[28]

The characteristics of centers rated with sensitive teachers and high child involvement were:

1. Student enrollment ranged from 20 to a maximum of 60.
2. Adequate amount of physical space as indicated by organization and amount of equipment available to each child.
3. Teachers were trained in early childhood education.[29]

The authors proceeded to state that because group day care necessitates adjustment to a variety of routines and the child spends much more time at the center than the average nursery school child, it is imperative for the center to incorporate *home* as well as *nursery school* characteristics in its program. This same point is illustrated by Mattick and Perkins, as well as Keister.

Day and Sheehan conducted a study to identify the elements of a better preschool.[31] They conducted formal and informal observations of 14 early childhood centers. The types of centers observed were:

1. Integrated day public school groups (Children 5 - 7 years of age)
2. Semi-cooperative day care center.

3. Montessori preschools.

4. Head Start Programs.[32]

The findings of their study were:

1. One type of educational program does not consistently prove to be better nor worse than other types of preschools.

2. Excellent preschool child care settings could be based on the philosophy of Montessori, the British Infant School or the Structured-Behaviorist.

3. Three main factors related to the quality of the preschool:

    (1) Organization and utilization of physical space.

    (2) Child's access to and use of materials.

    (3) Amount and type of adult-child interaction.

4. Behavior of the staff and children significantly improved if they were not in an open-space setting all day.

    a. Sound and distraction decreased.

    b. Opportunities for privacy are provided in divided centers.

    c. Sectioned nursery schools provided space for maps and activities simultaneously.

    d. Existence of some small rooms tended to encourage small group activities.

5. Higher quality programs had a variety of small manipulative and creative art materials always available for use.

6. High quality programs reflected high adult-child interaction of the following type:

    a. Teacher's conversation centered around expanding the child's sentences.

b. Teachers invited the children to participate in all activities of the center.

7. Researchers found a relationship between the level of adult-child interaction and the types of activities selected by children.

8. The children who attended centers where there was a high level of quality adult-child interaction tended to be alert, attentive, curious, cooperative and displayed a sense of humor.

9. Level of staff members training and degree of child-adult interaction were inversely related.

10. Positive relationship between the child's attention span and the degree of adult-child interaction.

11. Child's use of freedom (characteristic of preschool) on a constructive or destructive manner depends largely on the type and amount of adult-child interaction.[33]

Research Dealing with Specific Areas of the Child Care Center

Most of the research which can be applied to the child care center is derived from studies conducted in the nursery school setting. This is true because nursery schools developed from the fields of child development and education while day nurseries evolved from the disciplines of child welfare and medicine (specifically nursing). The former disciplines tend to deal with the whole child: his physical growth and development as well as his cognitive and social-emotional growth. The later disciplines centered on meeting his basic needs.

Therefore, the research which was done during the early years is derived from the fields of child development and education and tends to reflect their major areas of concern: social-emotional development and cognitive growth. Child care centers today, however, reflect an attempt to combine the efforts from all fields. The following summary of research findings exemplifies an attempt to coordinate information which will facilitate defining the elusive concept of quality child care.

Researchers have stated that nursery schools have had both positive and negative effects upon the I.Q. scores and social-emotional adjustment of children who have attended. Unfortunately, the researchers did not analyze the specific characteristics of each program; therefore one cannot identify the variables which may have contributed to changes in the child.

Research has indicated that culturally deprived children have made positive gains in language skills. It is important to note that these changes are found in programs different from the traditional nursery school.

> "Nursery school experience must be offered in a setting, however, in which there is understanding of the special problems of the deprived child...many of the methods perfected in the laboratory nursery schools with children of high educational status were found to be ineffective with those from deprived backgrounds. Limitations in experience; information, attention span, verbal ability and a general lack of orientation for learning prevent these children from making constructive use of the conventional nursery school program."[35]

Jeoffee identified the frustration of black parents with the traditional goal of social-emotional development as one of the main areas of conflict concerning child care programs.[36] She found that white parents tend to prefer the traditional nursery school goal of social-emotional development while the black parents preferred the cognitively-based curriculum.

These findings are particularly significant since the children traditionally filling day care centers have come from the lower socio-economic level. Centers have been modeled on the nursery school format developed at university nursery schools. Thus, the child care center of today may have to develop a program different from the traditional nursery school model. The problem is complicated by the fact that children from both the middle and lower social-economic levels are *sharing the same child care facilities today*.

No research has been found to suggest that children cared for in a day nursery are more likely to present developmental problems than those cared for by mothers.[36] Problem behaviors evidenced at nurseries tended to be related to the presence of specific home problems and often were the reason why the child was at the center.

Heiniche (1956) conducted a study to compare the effects of full residential care and day nursery care upon children aged two. Evidence from his study indicates that:

1. Separation effects of day care cannot be equated with those of residential care.
2. The day care child maintains his essential relationship and identification with his parents, despite the long day away from home.[37]

Joan Swift has reviewed all the research which has been compiled concerning the effects of the nursery (both nursery school and day nursery) experience upon the child. The five major factors affecting the nursery experience are:

1. Physical setting.
2. Program of activities and routines.
3. Teacher or teachers.

4. Peer group.
5. Child's own personality as reflected in his behavior which symbolize his abilities and interests.

The following research findings pertain to the physical setting:

1. Gutteridge (1939) found motor achievement curve rose rapidly during ages 1 and 2, and dropped after 3.
2. He attributed the lack of continued growth to the lack of stimulation and challenge of traditional nursery school equipment for the four and five year old child.
3. Conflicts are more frequent between children where play space is more restricted (Green, 1933, Jersild & Markey, 1935, and Murphy, 1937).
4. Absence of toys and moveable equipment on the playground was accompanied by more quarreling behavior (Johnson, 1935).
5. Type of equipment offered affects the kind of social interaction which takes place.
6. Murphy (1937) found cooperation stimulated by such equipment as swings, tricycles, and playground space for riding tricycles and wagons.
7. Markey (1935) found that blocks stimulated cooperation.
8. Updegraff and Herbst (1933) found that clay tended to stimulate cooperation among two and three year olds.
9. Cooperation is most apparent in dramatic play.
10. Greater imaginative play occurred under conditions of greater space.

Research findings concerning the program rest on various principles of learning for the preschool years. These principles reflect the traditional child development viewpoint of such people as Gesell, Thompson and McGraw. The following principles of learning should be considered when attempting to identify the characteristics of a quality child care center program:

1. Skill and acquisition depends on maturation and experience.

2. Some skills develop regardless of opportunity for practice (Dennis & Dennis, 1940).

3. Others develop when specific training is provided at the appropriate time (McGraw, 1935). (This principle is reflected in such concepts as Olson's organismatic age concept, early learning plasticity of the child and the critical period concept).

4. Practice alone without regard to maturational readiness will not produce learning (Hicks, 1930).

5. Motivation and interest in learning a skill is greatest when a child is developmentally ready for such learning.

6. Generally, children pass through the same stages in same sequence in our culture but at different times (Gesell, 1940). Piaget reflects this same viewpoint in his theory of cognitive development but he emphasizes the importance of maturation (neurological), experiences, social experiences and equilibration in facilitating that development.

7. Necessary to consider the child's mode of respondeing to his environment and avenue for learning. (What sensory process is the child using when organizing and adapting to his environment).[39]

Conflicts continue to be waged over the various theories of learning. Does the child learn best according to the stimulus-response model where learning is highly sequenced and specific behaviors are reinforced? Does the child learn best in a nonspecific way as he explores his environment, is exposed to different types of experience, and has the opportunity to experiment with a variety of materials? Is all knowledge innate? Research can be selected to support all viewpoints; it will suffice here to note the existence of the theories. The major factor to remember is the results of an earlier study which indicated that excellent preschool settings could be based on the philosophy of the structured-behaviorist or the interactionist. The main factors directly related to the quality of care were organization and utilization of physical space, child's access to and use of materials and the amount and type of adult-child interaction.

Research has shown that techniques (programs) which take into account the child's own interests and goals, builds on these factors, and defines educational goals precisely and clearly to the child tend to promote learning.[40] Furthermore, research concerning the type of adult-child interactions which facilitate learning indicate:

1. Child tends to seek attention and approval more actively when that attention has been limited, or denied (Gewirtz, 1954; Gewirtz & Baer, 1958; Gewirtz, Baer and Roth, 1958).

2. Children tend to model their behavior on that of a nurturant adult (Bandura & Huston, 1961).

3. Role of an adult as interpreter of standards of conduct was examined by Siegel, 1957; Siegel and Kohn, 1959. They found that children in an experimental play situation exhibited more aggression in the presence of a permissive adult than when no adult was present.[41]

Much of the research previously presented in this section has verified the fact that the staff---specifically the teacher---is a significant variable in determining the quality of a child care program. Therefore a look at research dealing with teacher behavior and the behavior of teacher-mothers is appropriate. It is important to examine the behaviors of teacher-mothers because the child care teacher acts in place of the parents and is responsible for the total development of the child. The nursery school teacher generally is concerned mainly with the social-emotional development and/or cognitive development of the child. Research has indicated that the preschool teacher should:

1. Have knowledge of developmental principles. (Focus of Child Development Programs).
2. Ability to recognize developmental readiness in the children. (Focus of Child Development Programs).
3. Ability to present ideas and materials so as to foster learning and the development of specific skills. (Domain of Teacher Training Institutions).

One can observe that the above skills are developed in different fields; this fact along with the historical development of nursery schools in America explains why there is no nationally accepted procedure for certifying teachers of preschool age children. The Report of the Education Commission of the States (June, 1971) suggested that states:

> Establish credentials in early childhood education or at least provide for a strong specialization in early childhood education within the preparation of an elementary certificate.[42]

A Day Care Survey conducted by the Office of Child Development in 1971 indicated 90% of all day care centers in America were licensed;

most of the directors and teachers in the centers do not have college degrees and few have had special training; the types of day care centers are custodial, educational and developmental.[43]

In a study of the type of day care and preschool services offered young, migrant children in central New York state, Chandler found that favorable results from these programs depend on the basic components, quality of adults involved with each component and the need for extensive and intensive training of the professional and paraprofessional personnel.[44]

Research has identified the following characteristics for the teacher-mother:

1. She provides specific verbal directions for a task.
2. She expands the child's sentences (similar to Day & Sheehan findings for preschool teachers).
3. Provides verbal and nonverbal feedback to the child about his attempts during task process.
4. Verbally describes the child's actions while he is performing them.
5. Disciplines with a verbal explanation.
6. Provides clear specific limits for the child.
7. Values the child as evidenced by her behavior.
8. Provides positive emotional supports for the child.
9. Displays a higher percentage of overt affective acts.
10. Values and reinforces child's attempts at independence and competence.
11. Values and accepts herself as evidenced by her behavior.[45]

Research concerning the effects of nursery school and day nursery experience upon the peer relationships of the child state:

1. Child's individual rate of development and temperament must be considered.
2. Degree of group interaction can be strengthened by providing toy for the group.
3. Setting a concrete task for the group also facilitates group interaction.
4. Attest to the reality of group identification by preschool kids (Irvine, 1952; Faigin, 1958; Spiro, 1958).[46]

Research studies indicate that the ability of the child to adjust to the nursery setting is dependent upon his familiarity with the kinds of activities offered at the center, degree to which he has solved his own problems of dependence, his level of self-confidence and his ability to perceive and adapt himself to play situations.

Many of these abilities are directly related to the attitudes held by the child's parents and the experiences they have provided him. Therefore, an examination of parental ideas about various aspects of a child care center can enable us to determine the type of care they would define as quality child care for their children. This is one of the main purposes for conducting the study.

DESIGN OF THE STUDY

The major problem to be dealt with in this study is the lack of a precise definition for the term quality child care. The primary purpose for this study is to identify the specific characteristics of a quality child care center.

Description of Research Design

The researcher decided that the specific aspects of a quality child care center could be determined by surveying parents, directors and teachers. It was decided that this information could be obtained through the use of a questionnaire. Furthermore, the questionnaire could also function as an instructional tool by encouraging people to focus on the various components of a child care center; this part of the study was not measured, however.

The method for distributing the questionnaires was:

1. Random selection of large and small child care centers listed in the Denver County register of child care facilities published by the Department of Social Services.
2. Selction of a sample parental population presently utilizing child care services.
3. Selection of a teaching staff presently employed at various child care centers.

The directors of the child care centers were to disperse the questionnaires to their clients; the parents were instructed to return the questionnaires to the centers. All information was kept confidential. The teachers were to return their questionnaires to the director in a sealed envelope. Most of the directors were instructed to return their questionnaires to me in a stamped self-addressed envelope, while one director returned the questionnaire with the teachers' and parents' forms.

Follow-up letters were mailed to the directors (see Appendix C) as well as phone calls. A small reminder note was given to the parents. It was necessary to contact all of the families at one center by phone. A formal letter requesting additional help was sent to another center (see Appendix C).

The data gathering period ran from February 12 through May 2, 1975. Data was not tabulated until all of the responses had been received or collected.

Sampling Procedures

A random selection of directors of large and small child care centers listed in the Denver County's register for child care centers was accomplished by selecting every third center. The four directors and two assistant directors of the surveyed child care centers also participated in the study. A total of 36 questionnaires were dispersed to the directors; three were returned because the centers were no longer in existence. Of the possible 33 returns, 15 questionnaires or 45% were returned (see Figure 1).

The identification of specific child care centers which would provide a racial, ethnic and economic cross-section of Denver's population was accomplished through consultation with a representative from the Family and Child Care Licensing Unit of the Department of Social Services located in Denver, Colorado. She identified two specific centers: one a profit-franchised (Nationally) child care center servicing mainly black, middle income families, and a parent-cooperative preschool servicing predominantly white, middle income families. She steered the researcher to a nonprofit agency in Denver which operates 12 child care centers which service Black, Mexican-American, White and Indian families from the lower income bracket (below or just above the newly established poverty level of $5,050 for an urban family of 4).

The investigator made contact with the acting director of this agency. She examined the questionnaire and then suggested that a presentation be given by the researcher at the next supervisory meeting. At this time the researcher could ask directors to volunteer their services in surveying parents. After much waiting and persistence, the researcher secured the cooperation of two centers. One center serviced primarily Mexican-American low income families, while the other center serviced mainly Black low income families.

A total of 261 questionnaires were dispersed through the four centers to their parent population. Eighty-five or 33% of the questionnaires were returned (see Figure 1).

A small sample of 9 questionnaires were sent to a group of parents formerly serviced by the Pioneer Preschool & Child Care Center formerly located in Detroit, Michigan. The purpose of this sample was to determine if the variable of direct researcher-respondent contact (in terms of the parents being aware of the researcher's sincere interest in child care because of previous contact with the researcher) upon the level of response. Eight of the 9 questionnaires were returned; the sole questionnaire which was not completed resulted from the fact that the family had moved. The people surveyed were two White middle income and 6 Black middle income families. Their results are not a part of the study, but instead are reported separately (see Appendix E).

The teachers who participated in the study were employed at the four child care centers which were selected for parental involvement in the study. Of the 29 questionnaires handed out 14 or 48% were returned.

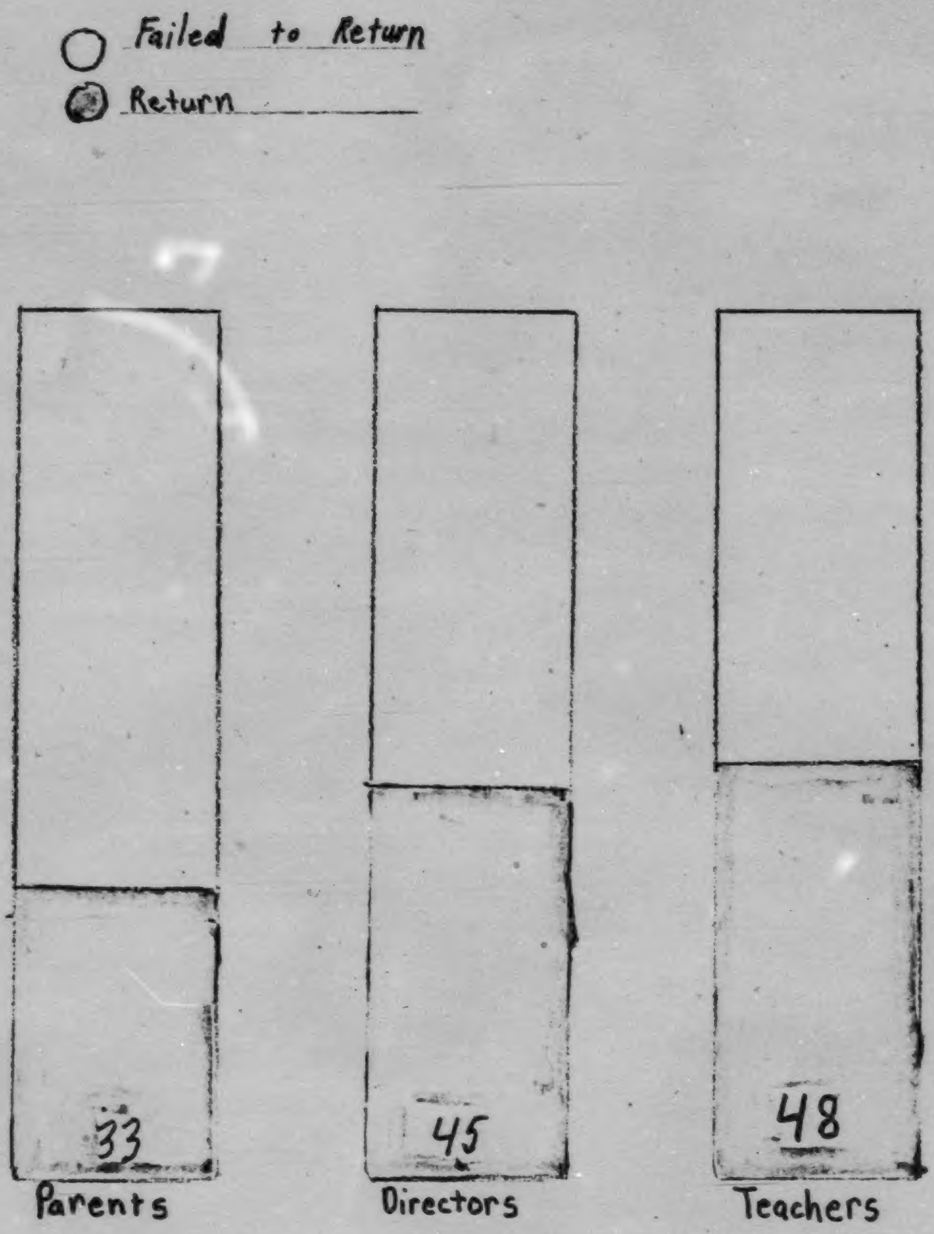


Figure 1
Percentage Return for Groups Who Participated in the Study

Data Gathering Instruments

The technique utilized in obtaining data was a questionnaire (see Appendix C). The questionnaire was composed of open-ended, rank and selection type questions. It was developed through consultation with the representative from the Department of Social Services (Family and Child Care Unit) and the researcher's educational adviser. The specific questions found in the questionnaire were generated from the researcher's past experience as an owner, director and head teacher of a nonprofit-privately owned child care center and a survey of various minimal rules and regulations for child care centers: Federal Interagency Requirements, State of Michigan and the State of Colorado.

The concept of quality child care was divided into five areas: center, program, staff, emergency-health-food and final points (parental role, evaluation, preferences and most significant characteristic). Subareas were identified and formalized as questions under each main section.

Statistical Treatment

The raw data will be dealt with in terms of percentage computations. Aspects of a quality child care center will be determined according to percentage rankings. No statistical treatment will be applied to determine significant differences or levels of significant differences.

ANALYSIS OF DATA

The data will be analyzed in the following manner:

1. Comparisons among the total parental responses, the directors and teachers.
2. Income level comparisons.
3. Comparison among the responses of parents utilizing the private-franchise center, parent-cooperative preschool and the Federal-State funded centers.

Large Group Comparisons: Parents-Directors-Teachers

The parents identified the following aspects as those denoting a quality child care center:

1. The primary function of the center is child development.
2. The order of importance for the center's functions are: child development/school readiness/custodial care/other.
3. The most important aspects of the center are: outdoor type of playground equipment and appearance; indoor size of the center and appearance.
4. The primary source for funding is parental payment based on a sliding scale.
5. Decisions concerning financial expenditures should be made by the Parent-Advisory Board.
6. The child care center should have specific educational goals; the social-emotional development of the child should be the major educational goal.
7. The children should be grouped according to age on the following basis:
    a. 2½ - 3 years: 1 adult/5 children.
    b. 3 - 4 years: 1 adult/5 children.
    c. 4 - 5 years: 1 adult/7 children

(Parents preferred 1 adult/5 children for cross-aged group 2½-5 years; but elected age grouping as a preference). These ratios are the same as those listed in the Federal Interagency Requirements.

8. Parents listed safety, sturdiness and quality, and use as the primary factors to be considered when purchasing equipment.

9. Children should go on trips as frequently as once a month. Parents tended to list such places as zoo, museum, bakery, when describing types of trips.

10. Parents tended to select individuals possessing four year degrees for administrative positions:

    a. Center Director - B.S. or B.A. in Child Development or Elementary Education: Early Childhood Education.

    b. Educational Director - B.S. or B.A. in Elementary Education: Early Childhood Education.

    c. Minimal Teacher's Qualifications - 2 years in Child Development (34%) or Bachelor's Degree in Elementary Education: Early Childhood Education (32%).

11. The Teacher Assistant's main qualifications are at least a high school degree and a liking for children.

12. Parents listed nurse, janitor and cook as other necessary staff members (in that order).

13. Major avenue for staff training should be workshops or in-service training in a variety of areas.

14. The major form of emergency precautions should be (policy) emergency forms on file and (procedures) specific emergency steps to be followed by the staff.

15. A child care center should provide dental, vision and hearing examinations. It should also

function as an agency which cooperates with other community organizations by allowing its facilities to be utilized as a location where other services can be brought in and made available to the community.

16. The center should provide breakfast, lunch and two snacks; the food should be paid for through a combination of parental fees and Federal-State subsidies.

17. The nutritional requirements of the child should be the only factor included in the per child weekly figure ($3.75/week).

18. Parents perceive their main role as that of cooperating with the child care center: accepting and fostering the major goals and functions of the child care center.

19. A combination of staff, director, parental and outside evaluations should be utilized when assessing the center.

20. The most important characteristics of a child care center, as identified by parents, is the interest and care displayed by the staff.

21. Parents preferred the parent-cooperative (31%) and nonprofit community center (28%) to that of the other centers.

22. Parents selected the concept of a home care center located in the neighborhood as the type of infant-toddler care which best meets their needs.

An analysis of the findings indicates that parents tend to associate quality care with aspects generally found in the home environment: small adult/child ratio, child development as primary function, social-emotional development of the child as primary educational goals, etc. Many of the parents' selections can be related to specific research findings concerning conditions which may facilitate quality care:

1. Amount and type of child-adult interaction (Day and Sheehan) which can be affected by the adult/child ratio.

2. Physical setting and utilization of space (Day and Sheehan) which is related to the actual size of the center.

3. Parents' preference for professionally trained individuals in administrative positions; positions from which decisions about the total operation of the center and the educational program are made in keeping with research which emphasizes the importance of the staff. Weikart contends that in order to have an effective preschool the center must have an effective staff model which provides at least two major elements: planning and supervision.[47]

4. The parents' perception of the child care center as a location from which other community services can be dispersed is in line with the Children's Bureau's description of child care.[48]

A complete tabulation of the parental, directors' and teachers' responses can be found in Appendix D (see TABLES I-VII).

The directors, parents and teachers selected workshops and in-service training as the most desirable form for staff training. They tended to mention such categories as child development, early childhood education, working with exceptional children,biculture-bilingual education, disabilities, art, music, dramatic play, etc. as areas to be covered in the workshops and in-service programs. Competency based teacher education would tend to facilitate the needs of the child care teachers.

Teachers and parents selected lower dollar allotments, \$3.75/week/child, for food costs than did directors \$6.25/week/child; yet all of the groups felt that a quality child care center would provide two meals and two snacks. All groups list meeting nutritional requirements (food) as the main factor to be included in this price; the teachers and parents were the only groups to mention the cook's salary as a condition which should be factored into this figure.

Perhaps the director's selection of $6.25/week/child approaches reality because they make these types of decisions daily. A licensing consultant from the Department of Social Services located in Detroit, Michigan quoted the figure of $3.75/week/child as projected cost figure solely for food; this figure was given to the researcher three years ago.

Parents, directors and teachers agreed on the following characteristics of a quality child care center: primary function, funding, educational goals, factors to be considered when purchasing equipment, trips, qualifications for the center's director, teacher, and teacher's assistant; emergency policies and procedures, the number of meals to be served and the role of the parents.

The parents and teachers agreed on specific areas which can affect the amount and type of adult-child interaction:

1. Both groups prefered low child/adult ratios. (Selected ratios listed in Federal-Interagency Requirements).
2. Decision making process for financial expenditures.
3. Identified the amount of interest and care displayed by the staff as the most important aspect of the child care center.

The parents and teachers also agreed on the type of evaluation procedures to be followed as well as their perception of the child care center as an organization which should cooperate with other community agencies by allowing services to be brought into the center.

The directors preferred a higher adult/child ratio for two of the four groups and indicated no preference for other children aged 4-5. They identified the educational director as the individual who should make the financial decisions and listed the staff's qualifications as the most important aspect of a child care center.

The directors perceived all forms of evaluation as the best procedure. They also felt that the child care center should function both as a referral service and a location where services may be brought in.

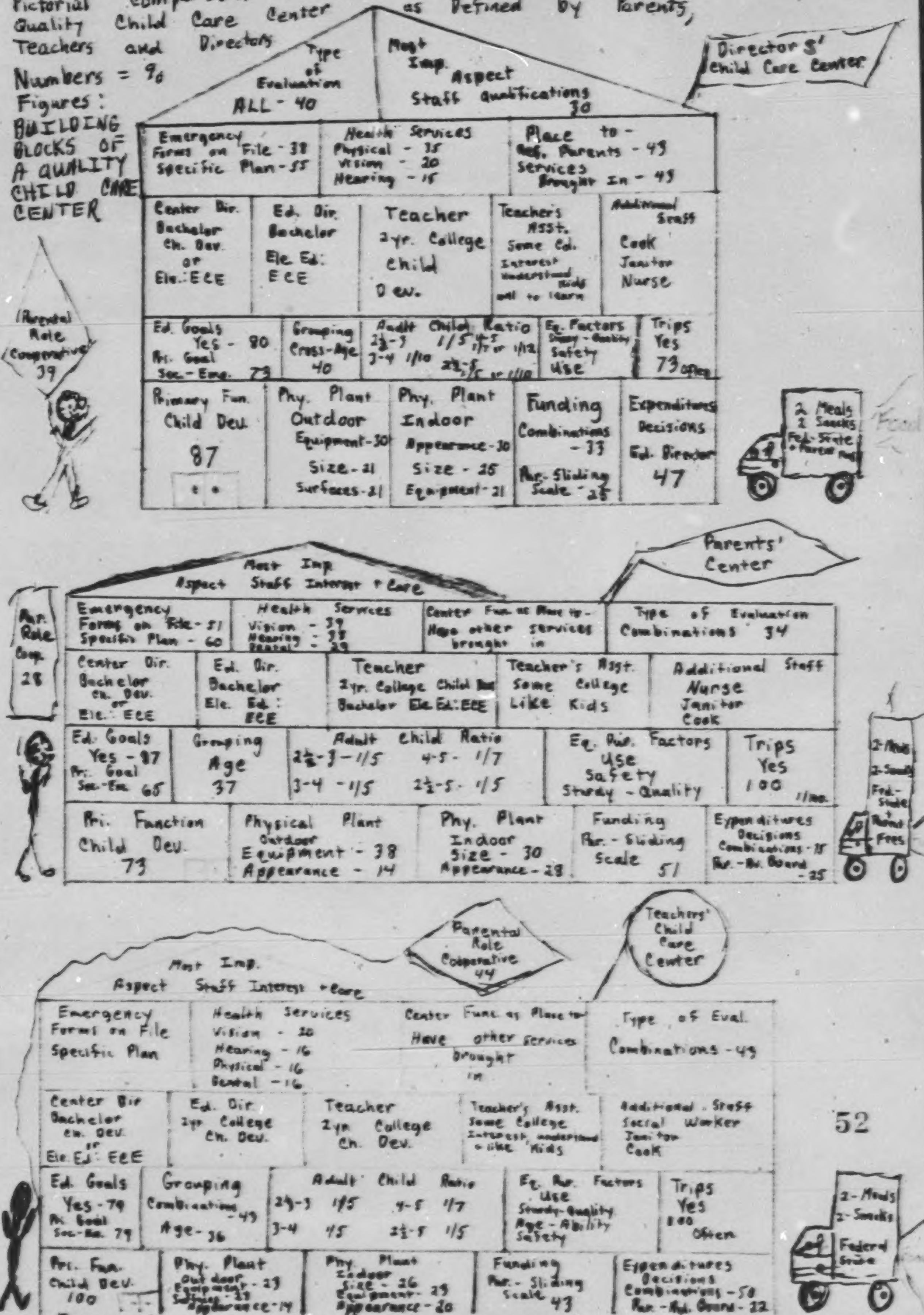
Figure 2 illustrates the Building Blocks of a Quality Child Care Center as identified by parents, directors and teachers. Figure 3 illustrates the major areas of agreement and disagreement among the groups.

Figure 2

Pictorial Comparison of the Characteristics of a Quality Child Care Center as Defined by Parents, Teachers and Directors

Numbers = %

Figures: BUILDING BLOCKS OF A QUALITY CHILD CARE CENTER



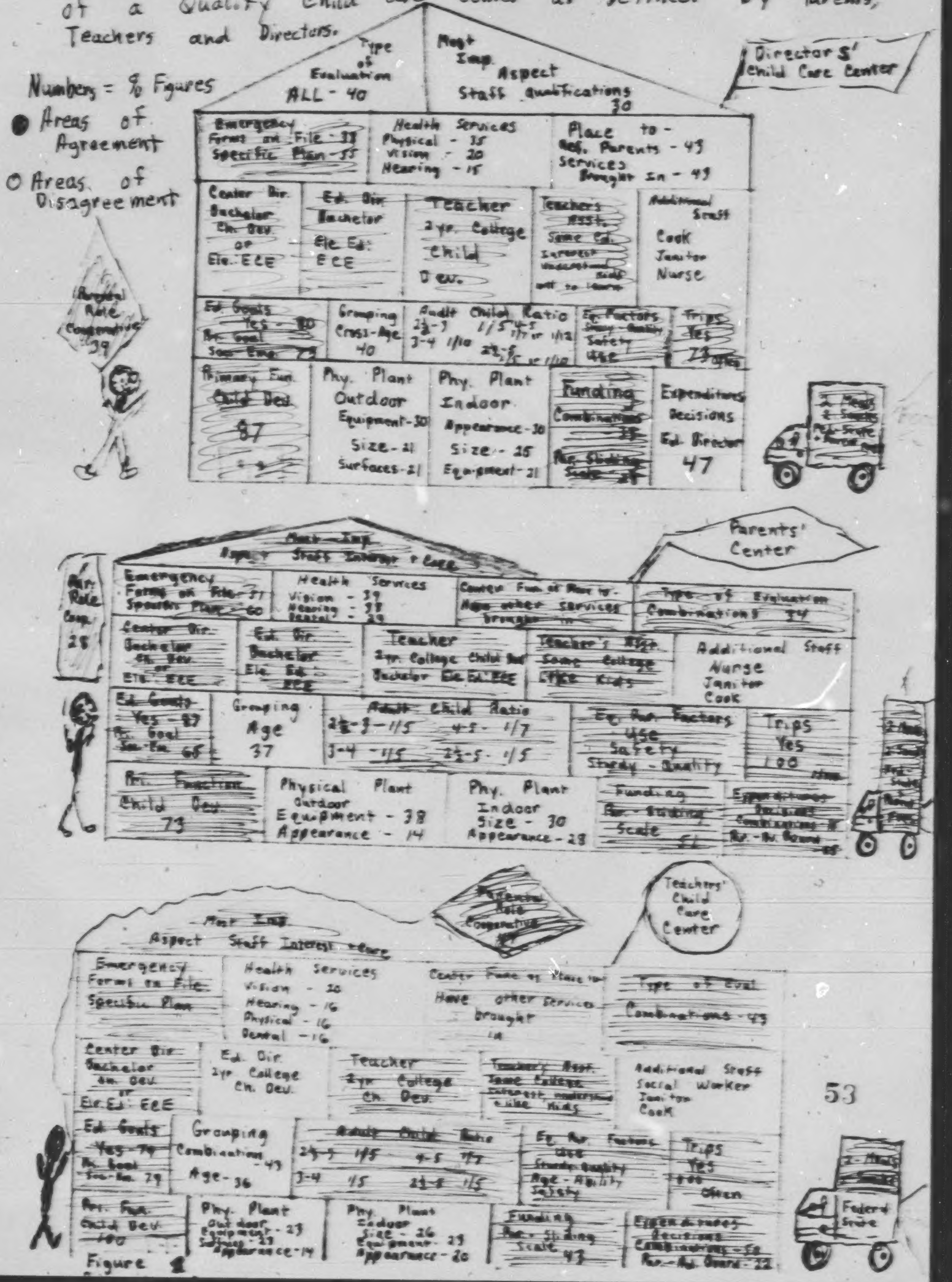
Type of Evaluation ALL - 40	Most Imp. Aspect Staff Qualifications 30			
Emergency Forms on File - 38 Specific Plan - 55	Health Services Physical - 35 Vision - 20 Hearing - 15	Place to - Ref. Parents - 43 Services Brought In - 43		
Center Dir. Bachelor Ch. Dev. or Ele.: ECE	Ed. Dir. Bachelor Ele. Ed.: ECE	Teacher 2yr. College Child Dev.	Teacher's Asst. Some Col. Interest understand kids will to learn	Additional Staff Cook Janitor Nurse
Ed. Goals Yes - 80 Pri. Goal Soc.-Emo. 73	Grouping Cross-Age 40	Adult Child Ratio 2½-3 1/5 4-5 1/7 or 1/12 3-4 1/10 2½-5 1/5 or 1/10	Eq. Factors Sturdy - Quality Safety Use	Trips Yes 73 often
Primary Fun. Child Dev. 87	Phy. Plant Outdoor Equipment-30 Size-21 Surfaces-21	Phy. Plant Indoor Appearance-30 Size - 25 Equipment-21	Funding Combinations - 33 Par.-Sliding Scale - 25	Expenditures Decisions Ed. Director 47

Most Imp Aspect Staff Interest + Care				
Emergency Forms on File - 51 Specific Plan - 60	Health Services Vision - 39 Hearing - 38 Dental - 29	Center Fun. as Place to - Have other services brought in	Type of Evaluation Combinations 34	
Center Dir. Bachelor Ch. Dev. or Ele.: ECE	Ed. Dir. Bachelor Ele. Ed.: ECE	Teacher 2yr. College Child Dev. Bachelor Ele. Ed.: ECE	Teacher's Asst. Some College Like Kids	Additional Staff Nurse Janitor Cook
Ed. Goals Yes - 87 Pri. Goal Soc.-Em. 65	Grouping Age 37	Adult Child Ratio 2½-3 - 1/5 4-5 - 1/7 3-4 - 1/5 2½-5 - 1/5	Eq. Pur. Factors Use Safety Sturdy - Quality	Trips Yes 100 1/mo.
Pri. Function Child Dev. 73	Physical Plant Outdoor Equipment - 38 Appearance - 14	Phy. Plant Indoor Size - 30 Appearance - 28	Funding Par. - Sliding Scale 51	Expenditures Decisions Combinations - 15 Par. - Ad. Board - 25

Most Imp. Aspect Staff Interest + Care				
Emergency Forms on File Specific Plan	Health Services Vision - 20 Hearing - 16 Physical - 16 Dental - 16	Center Func. as Place to Have other services brought in	Type of Eval. Combinations - 43	
Center Dir Bachelor Ch. Dev. or Ele. Ed.: ECE	Ed. Dir. 2yr College Ch. Dev.	Teacher 2yr. College Ch. Dev.	Teacher's Asst. Some College Interest, understand & like Kids	Additional Staff Social Worker Janitor Cook
Ed. Goals Yes - 79 Pri. Goal Soc.-Em. 79	Grouping Combinations - 43 Age - 36	Adult Child Ratio 2½-3 1/5 4-5 1/7 3-4 1/5 2½-5 1/5	Eq. Pur. Factors Use Sturdy-Quality Age - Ability Safety	Trips Yes 100 Often
Pri. Fun. Child Dev. 100	Phy. Plant Outdoor Equipment - 23 Surfaces - 23 Appearance - 14	Phy. Plant Indoor Size - 26 Equipment - 23 Appearance - 20	Funding Par. - Sliding Scale 43	Expenditures Decisions Combinations - 50 Par. - Ad. Board - 22

Figure 2

Figure 7 Pictorial Comparison of the Characteristics of a Quality Child Care Center as Defined by Parents, Teachers and Directors.


Numbers = % Figures
● Areas of Agreement
○ Areas of Disagreement
Directors' Child Care Center
Type of Evaluation ALL - 40
Most Imp. Aspect Staff Qualifications 30
Emergency Forms on File - 33 Specific Plan - 55
Health Services Physical - 35 Vision - 20 Hearing - 15
Place to - Ref. Parents - 43 Services Brought In - 43
Center Dir. Bachelor Ch. Dev. or Ele. ECE
Ed. Dir. Bachelor Ele. Ed. ECE
Teacher 2 yr. College Child Dev.
Teachers Asst. Same Ed.
Additional Staff Cook Janitor Nurse
Ed. Goals Yes - 80
Grouping Cross-Age 40
Adult Child Ratio 2½-3 1/5 4-5 1/7 or 1/12 3-4 1/10 2½-5 1/5 or 1/10
Eq. Factors Safety Use
Trips Yes 73
Primary Fun. Child Dev. 87
Phy. Plant Outdoor Equipment - 30 Size - 21 Surfaces - 21
Phy. Plant Indoor Appearance - 30 Size - 25 Equipment - 21
Funding Combinations
Expenditures Decisions Ed. Director 47
Parental Role Cooperative 39
Parents' Center
Most Imp. Aspect Staff Interest + Care
Par. Role Coop. 28
Emergency Forms on File - 37 Specific Plan - 60
Health Services Vision - 39 Hearing - 38 Dental - 29
Center Fun. as Place to - Have other services brought in
Type of Evaluation Combinations 34
Center Dir. Bachelor Ch. Dev. or Ele. ECE
Ed. Dir. Bachelor Ele. Ed. ECE
Teacher 2 yr. College Child Dev. Bachelor Ele. Ed. ECE
Teacher's Asst. Some College Like Kids
Additional Staff Nurse Janitor Cook
Ed. Goals Yes - 87 Pr. Goal Soc-Em. 65
Grouping Age 37
Adult Child Ratio 2½-3 - 1/5 4-5 - 1/7 3-4 - 1/5 2½-5 - 1/5
Eq. Pur. Factors Use Safety Sturdy - Quality
Trips Yes 100
Pr. Function Child Dev. 73
Physical Plant Outdoor Equipment - 38 Appearance - 14
Phy. Plant Indoor Size - 30 Appearance - 28
Funding Par. - Sliding Scale
Expenditures Decisions Combinations
Teachers' Child Care Center
Parental Role Cooperative
Most Imp. Aspect Staff Interest + Care
Emergency Forms on File Specific Plan
Health Services Vision - 20 Hearing - 16 Physical - 16 Dental - 16
Center Func. as Place to - Have other services brought in
Type of Eval. Combinations - 43
Center Dir. Bachelor Ch. Dev. or Ele. Ed. ECE
Ed. Dir. 2 yr. College Ch. Dev.
Teacher 2 yr. College Ch. Dev.
Teachers Asst. Some College Interest, understand + like Kids
Additional Staff Social Worker Janitor Cook
Ed. Goals Yes - 79 Pr. Goal Soc-Em. 79
Grouping Combination - 43 Age - 36
Adult Child Ratio 2½-3 1/5 4-5 1/7 3-4 1/5 2½-5 1/5
Eq. Pur. Factors Use Sturdy Quality Age - Ability Safety
Trips Yes 100 Often
Pr. Fun. Child Dev. 100
Phy. Plant Outdoor Equipment - 23 Surfaces - 23 Appearance - 14
Phy. Plant Indoor Size - 26 Equipment - 23 Appearance - 20
Funding Par. - Sliding Scale 43
Expenditures Decisions Combinations - 50 Par. - Ad. Board - 22
Federal State
Figure

The parents and teachers identified aspects which can affect the amount and type of child-adult interaction positively; this aspect has been identified as a significant variable in determing the effectiveness of a program. The amount and type of child-adult interaction, use of physical setting and implementation of a program are dependent on the abilities of the staff to plan and make decisions (Weikart).[49] The staff's abilities can be a function of their qualifications, a factor the directors identified as the most important characteristic of a quality child care center. These findings indicate that all groups have identified aspects of a quality child care which research has identified as instrumental in determining a nursery school's effectiveness in meeting its established goals.

All groups failed to mention the center's ability to meet the codes established by the State and Local Fire, Health and Building-Engineering Departments as a characteristic of a quality child care center. Perhaps they accept this as a given fact. The directors were the only group which mentioned the State's Minimum Rules and Regulations as a guide to be followed in establishing policies and procedures for the center's treatment of emergencies and health questions.

Income Level Comparisons

The parental-cooperative and privately owned child care center (middle income) differed from the Federal and State funded centers (lower income) in the following areas:

1. Middle income selected child development as a primary function of the child care center more frequently than the lower income group. They

tended to select child development and readiness for school. (See Appendix D). This is in line with Joeffe's findings.[50]

2. Aspects of outdoor area.

3. Funding structure.

4. Decision making process for financial expenditures.

5. Degree of emphasis placed on social-emotional development as the primary educational goals.

6. Adult/child ratios: M.I.-L. preferring a higher adult/child ratio for children aged 4-5. (State certified centers tend to function at a higher adult/child ratio than those meeting both Federal and State requirements).

7. Higher percentage of L.I.-L. parents selected two years of college as minimal qualifications for teachers. M.I.-L. preferred a bachelor's degree in elementary education: early childhood education.

8. L.I.-L. parents selected course work at the college level as the best method for staff training. (This finding would be consistent with their selection for minimal teachers' qualifications). M.I.-L. parents identified in-service workshops as the best technique for teacher improvement.

9. Difference in preference for annual health services to be provided by the center.

10. A higher percentage of L.I.-L. parents perceived the center's function as that of allowing other community agencies to bring specific services to the center and thereby reach children and parents. (This may be a function of the parents' ability to meet the child's basic needs).

11. Difference in funding for food costs; yet this pattern reflects both groups initial preference for the center's tuition being established on parental fees according to a sliding scale. (All parents want to pay some portion of their child's tuition).

12. Differ in amount to be allocated for food costs.

13. M.I.-L. parents tended to perceive the child's response to the center as a determinant of the center's quality; L.I.-L. parents identified the staff's interest and care as the most significant aspect of a child care center.

Table VIII illustrates the similarities and differences between the two groups.

TABLE VIII
COMPARISON OF PARENTAL RESPONSES: THE ASPECTS OF A QUALITY CHILD CARE CENTER

AREAS	MIDDLE Income LEVEL %	LOWER INCOME LEVEL %
Primary Function		
Child Dev.	81	66✓
Physical Plant		
Outdoor		
Equipment	34	39
Appearance	8	29✓
Surfaces	12	—
Safety	12	12
Indoor		
Appearance	26	31
Size	30	31
Safety	4	6
Funding		
Parental Payment (S. Scale)	35	71✓
Expenditures (Decisions)		
Combinations	43	21✓
Par.-Ad. Board	24	40✓
Specific Ed. Goals		
Primary Goal		
Soc.-Emo. Dev.	65	45✓
Grouping		
Age		
Adult / Child Ratio		
2½-3 1/5	79	64✓
3-4 1/5	58	58
4-5 1/7	47	41
4-5 1/12	53	25
2½-5 1/5	68	71
Trips		
Frequency		
Type - Zoo, Museum, Bakery...	49	53
Center Dir.		
Bachelor Ch. Dev. or Ele. Ed.: ECE	43	43
Educational Dir.		
Bachelor Ele. Ed.: ECE	56	54
Min. Teacher Qual.		
2yr. College C. Dev.	32	47✓
Bachelor Ele. Ed ECE	35	30

TABLE VIII
CONTINUED

AREAS	M. I. L.	L. I. L.
	%	%
Other Staff Members		
Nurse	13	10
Child Psych.	10	1
Social Worker	4	1
Cook	10	12
Maintenance	11	12
Staff Training Programs		
Workshops In-Service	51	29 ✓
Course Work at College Level	9	32 ✓
Emergency		
Policy - Forms on File	59	46
Procedure - Specific Plan	61	61
Annual Health Services Provided		
Hearing	28	11 ✓
Vision	27	19
Dental	13	28
Physical	9	24 ✓
Center Coop. Other Community Agencies		
Location: Ser. Brought in	51	69 ✓
Food		
# Meals - 1-2 Snacks	46	6 ✓
2-2 Snacks	34	85 ✓
Payment - Both	59	21
Fed.- State	11	72 ✓
Factor's Included in Figure		
3.75/wk./child	28	17
5.00/wk. /child	14	30 ✓
Nutritional Requirements	37	23
Parental Role		
Cooperative	25	36
Type of Evaluation		
Combinations	39	25
Most Important Characteristic		
Staff Interest + Care	13	30 ✓
Factors Aff. Eq. Pur.		
Use	26	26
Safety	24	25
Age-Ability	19	20

Center Type Comparisons

A comparison of responses on the basis of the type of centers used by the parents indicates that the parents tend to select centers best meeting their needs similar to the type they are presently using.

The major differences found among the parental responses of parents utilizing the parent-cooperative, profit-franchised centers and Federal-State funded centers were:

1. Degree in level of selection of child development as primary function for the center.
2. Higher percentage of parents utilizing the Federal-State funded center identified parental payments on a sliding scale as the major source for funding.
3. Degree in level of parental responses identifying social-emotional development as main focus for educational goals.
4. Procedure identified for grouping children.
5. Parents already having social workers at their center did not identify this professional as a needed staff member, while one group of parents not having social workers did.
6. Federal-State center identified course work at the college level as the best technique for staff training.
7. Differences exist in characteristics associated with food:
    a. Number of meals to be served.
    b. Payment for meals and snacks.
8. Differences regarding the selection of the type of child care center best meeting their needs.

P

9. Parents utilizing the parent-cooperative and Federal-State funded center selected the same type of infant-toddler care: home center located in the neighborhood.

10. Parents using the private-franchised center selected the infant-toddler center as the center which would best meet their needs.

Table IX illustrates the differences and similarities existing among the groups.

TABLE IX COMPARISON OF PARENTAL RESPONSES ON THE BASIS OF CENTERS BEING USED

AREAS	PARENT-COOP.	PRIVATE	FED.-STATE
Pri. Function			
Child Dev	84	76	66
Physical Plant			
Outdoor			
Equipment	39	29	32
Appearance	8	9	26
Safety	9	15	16
Surfaces	16	9	-
Indoor			
Size	29	31	32
Equipment	25	11	-
Appearance	23	28	36
Funding			
Par.-Fees(Sli. Sc.)	37	33	67
Expenditures (Decisions)			
Par.-Ad. Board	17	28	25
Fin. Ad.	3	10	25
Combinations	59	28	17
Pri. Ed. Goal			
Soc.-Emo. Dev.	81	48	45
Grouping of Children			
Other	38	9	21
Age	31	48	13
Adult/Child Ratio			
2½-3 1/5	81	76	64
3-4 1/5	56	60	58
4-5 1/7	52	43	42
4-5 1/12	39	52	25
2½-5 1/5	78	57	67
Factors Aff. Eq. Pur.			
Age-Ability	15	24	24
Safety	16	31	24
Use	28	25	32
Sturdiness & Quality	27	10	10
Trips (1/mo.)	34	33	25
Type: Zoo, Mus.,...	56	43	50
Staff Qualifications			
Cen. Dir. : B.S. or B.A. in C.D. or El. Ed.: ECE	39	47	50

TABLE IX CONTINUED

AREAS	PARENT-COOP.	PRIVATE	FED.-STATE
Ed. Dir.: Bachelor			
El. Ed.:ECE	39	74	58
Min. Tea. Qual.			
2 yr. Child Dev.	25	39	50
Bachelor El. Ed.:ECE	40	31	29
Additional Staff (Nurse)	10	17	15
Child Psych.	18	2	-
Social Worker	8	-	-
Cook & Janitor	6	15	7
Staff Training			
Workshops-Inservice	57	45	20
Course Work at College	6	9	47
Emergency-Health-Food			
Pol.: Em. Forms on File	51	67	67
Pro.: Specific Plan	58	64	67
Annual Health Services Pro.			
Dental, Physical, Vision	13	19	23
Dental, Vision, Hearing	23	22	18
Center Coop. Other Agencies			
Loc.: Ser. Brought In	45	58	69
Food(2Meals- 2 Sn./day)	3	19	84
1 Meal-2 Sn./day	69	48	8
Par. Role(Cooperative)	30	31	36
Evaulation(Combinations)	41	38	31
Most Imp. Aspect			
Interest & Care of Staff	22	5	31
Child's Response	-	48	-
Center Best Meeting Par. N.			
Nonprofit Community Cen.	10	14	67
Nonprofit Pri. Owned	5	27	-
Parent-Cooperative	55	11	17
Infant-Toddler Center			
Home Care Cen. In Nei.	51	21	42
Infant-Toddler Cen.	3	29	8

SUMMARY AND CONCLUSIONS

Restatement of Problem

The major problem dealt with in this study was the lack of a precise definition for the concept quality child care center. The purpose of this study was to identify the specific characteristics of a quality child care center.

Description of Procedures

The procedure utilized in identifying the characteristics of a quality child care center was the survey method. A questionnaire was developed by the researcher in conjunction with her educational adviser and a representative from the State of Colorado's Department of Social Services. The questionnaire contained open-ended, selection and rank in order of importance type questions.

A random selection of directors of child care centers and preschools located in Denver was accomplished by selecting every third center listed in the register of child care centers, published by the Department of Social Services.

The parental sample population was identified by a representative from the Department of Social Services working in the field of Family and Child Care Services. The sample represents a racial, ethnic and economic cross-section of Denver. The parents were all using some type of preschool/child care service.

The teachers who participated in the survey were employed at the four centers participating in the study.

The questionnaires were distributed and collected over a three-month period: February 12 through May 2, 1975. The data was not tabulated and interpreted until all of the completed questionnaires were returned. Raw percentage scores were tabulated for each group; no statistical treatment was utilized to determine significant differences and levels of significant differences.

Comparisons were made among the large groups: parents, directors and teachers; types of centers surveyed: parent-cooperative, private-franchise and Federal-State funded center; and between the different income levels: middle and low.

Major Findings

The major findings derived from this study are:

1. Parents and teachers tend to select and rank similar areas as being characteristics of a quality child care center.
2. No difference exists between the racial, ethnic and economic levels represented by the parents when selecting the qualifications for the director and educational director of a child care center.
3. The parents selected parental payment on the basis of a sliding scale as the main source for funding the center.
4. All parental groups wanted to pay some portion of their child's tuition.
5. All groups tended to identify characteristics of a quality child care center similar, if not the same, as those mentioned by experts in early childhood education, child development and social services.
6. All groups perceived the child care center as a location where other community services can be brought and dispersed.

7. All groups identified child development as the primary function of the child care center.

8. Parents and teachers identified the adult/child ratios *presently* listed in the existing *Federal Interagency Requirements* as a characteristic of a quality child care center.

9. Parents and teachers perceived the amount of interest and care displayed by the staff as the most important characteristic of a quality child care center; directors selected the qualifications of the staff as the most important aspect of a quality child care center. (Both findings are in keeping with prior research dealing with the importance of the staff in complementing and maintaining an effective preschool program).

10. Parental preference for funding of the center on the basis of a sliding scale based on the parents' incomes and funding of food costs through the use of Federal-State subsidy *increased as income level decreased*.

11. Aspects identified as characteristics of a quality child care center by all groups tended to resemble the type of center they were presently using or employed at.

Conclusions

The following conclusions are derived from the research findings illustrated in this study:

1. Parents, teachers and directors can identify specific aspects of a child care center as being characteristics of a quality center.

2. Parents, teachers, and directors can agree on many of the main areas associated with the organization, implementation and operation of a quality child care program.

3. A definition of quality child care can be arrived at by tapping the ideas of people *using* and *involved* in providing child care services.

4. Definite lack of descriptive research dealing with the concept of quality child care.

5. Parental preferences for funding of the center according to a sliding scale and the utilization of Federal-State and parental fees in order to cover food costs strongly indicates that parents do see the need for some type of Federal involvement and funding for child care programs.

6. No one perceived child care as a threat to the family unit, a position taken by former President Nixon when he vetoed the Comprehensive Child Care Bill in 1971.

Recommendations for Further Investigation

In light of the fact that the Federal government is considering altering the existing Federal Interagency Requirements for Child Care Centers, the possible passage of the Brademas-Mondale Bill, and the findings derived from this study, the following recommendations are being made:

1. Need for more research of this nature to determine if the same or similar characteristics will be identified by other individuals.
2. Need to select and establish specific National qualifications for the directors, educational directors and teachers working in child care centers.
3. Need to implement this type of research before new rules and regulations for child care centers are written at the state level instead of holding public hearings after the legal document has been drawn up.
4. Need for more sophisticated and longitudinal research in the area of child care.
5. Need to validate or disprove the findings of this study.
6. Possible use of these findings as providing students in the field of child development and early childhood education with a working model of a quality child care center as defined by parents;

teachers and directors.

7. Exploration of the theory that the degree of a child care center's quality is directly related to or determined by the level of consensus existing among the parents, directors and teachers.

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FOOTNOTES

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APPENDIX A

ED 078 955

Study of Rules + Regulations for Licensing Child Care Centers in America.

Interviews with Officials and day care facility Operators were carried out in 32 cities and 26 countries, with a stratification of facility interviews as follows:

	Urban	Small Urban	Rural	Total
Family Day Care Home	10	2	3	16
Group Day Care Home		2	3	6
Day Care Center	48	18	13	77
	68	22	19	97

A directed open discussion technique was used in place of a structured questionnaire. This allowed inspectors and facility operators to concentrate on what they considered to be the most important problems or delays in the total licensing process, both state and local.

SUMMARY OF FINDINGS, CONCLUSIONS, AND RECOMMENDATIONS

FINDINGS

Regulation

1. There are three major types of day care facilities licensed in the United States:

Family Day Care Home -- a category in 48 state regulations

Group Day Care Homes -- a category in 9 state regulations

Day Care Centers -- a category in 50 state regulations

These three categories are not similarly defined from state to state.

Child Care Bulletin No. 2, Subject: Feasibility Report And Design Of An Impact Study Of Day Care contains the Federal Interagency Day Care Requirements which define these three categories.

2. State licensing of family day care homes is not mandatory in 11 states and Georgia, which has regulations, but does not license family day care homes. Licensing of centers is voluntary in Mississippi, and the center licensing regulation has been overturned by court action in Idaho.

3. In a few states requiring licenses, there are large gaps in coverage where licensing is not mandatory for all cities and counties.

4. Requirements for family day care homes are less stringent and comprehensive than requirements for day care centers. This is true for the zoning, fire safety, and building code requirements of local governments, as well as the physical facility and program requirements of the state agency.

5. The day care licensing regulations of 60 per cent of the states contain provisions for infant care in day care centers when special requirements are met. Three of six states visited in the follow-up survey had state requirements for infant care. However, in Virginia there were no centers with infants in care, in California infant care in centers was rare and discouraged by the licensing agency, and in Colorado, the space requirements are doubled when infants are in care.

Physical Plant

6. Except for the state licensing regulations, day care facilities are not usually specifically defined or classified in state or local regulations applied to day care facilities by inspectors. Zoning, fire safety, health, and building code requirements are usually not coordinated with state day care licensing regulations.

7. Inspectors outside the licensing agency often do not have guidelines for application of the regulations to day care facilities.

Physical Plant True in Dallas

8. Local regulations for fire safety, health, and building usually increase in stringency as the population density increases. Both the number of separate regulations to be met and the sophistication of their requirements are highest in urban metropolitan areas.

9. In most cases, applicants do not consider requirements unrealistic, but the cost of meeting the requirements is often inhibitory.

Procedures

10. The licensing authority in most states (84%) is the department of welfare or its equivalent.

11. Typically, day care centers are licensed by the state welfare departments, and day care homes by local county welfare departments.

✓12. The department of welfare relies on other state agencies, principally the office of the fire marshal and the department of health, sanitation, and fire safety.

✓13. The actual inspections of day care facilities and consequent reports are usually made by city and country agency staff without reimbursement from the state.

Application [illegible] Quality. ←

✓14. Although threr are many similarities, no two states, cities, or counties follow the same specific procedures or interpret regulations in the same way.

15. Approximately 15 to 20 major work tasks are required of an applicant in the licensing process, assuming that all regulations are met on the initial attempt and that second and third inspections are not necessary. When the tasks of government officials are included, the total number of tasks in a typical licensing process approximates 50 to 75. If reinspections

are required, or other licensing problems occur, in excess of 100 tasks may need to be performed by the applicant and a variety of agencies at different levels of government.

Application
Plant

16. The greatest problem of coordination cited by the state licensing authorities were in dealing with the state fire marshal, the local fire marshals, the local health officers, and the state health officers -- in that order.

17. Thirty-seven state licensing authorities plan major revisions in their regulations during the next two years.

No National
Model to
Define
Model
Plant
Facilities
-Fire
-Health
-Safety

Points of Delay

18. Delays in the licensing process attributed to government offices by state licensing agencies and the approximate average number of days' delay are as follows:

Delays attributed to:	Licensing Agency
Fire Inspection	65 days
Sanitation Inspection	35 days
Health Inspection	35 days
Zoning	50 days

These delays can be cumulative.

★ 19. The most frequent reasons given by the state for denying licenses to initial license applicants were that the applicants lacked qualified staff, failed to comply with fire codes, or had uncorrectable building violations. Delay in granting license

→ Not Ever
at State
Level

20. Persons who had initiated the licensing process over 12 months ago, but had not completed the process were asked why they had not done so. Forty-eight percent said they had encountered problems meeting regulations; others gave business reasons (38%) and personal reasons (14%). Applicants said the most difficult regulations to meet were the physical structure requirements for the day care facility and the fire safety apparatus required for an operating facility.

Ways
to
Improve
Licensing

21. The state licensing agencies indicated that the best ways of speeding up the licensing process, without loss of effective program control, are to increase the licensing staff, improve state administrative procedures, re-organize local staff, and develop more written state requirements, codes and guidelines specifically designed for day care.

CONCLUSIONS

1. There is a tendency for states to include too much detail in statutes authorizing regulation of day care facilities.

2. A standardized method of classification of day care homes and day care centers is needed. At present, the three generally accepted classifications are family day care homes, group day care homes, and day care centers wh[illegible]iffer widely in definition from state to state, making meaningful comparisons between states difficult.

3

3. The applicants surveyed seldom had adequate information concerning specific code requirements during the pre-application stage. Few licensing workers had informed the applicant of specific local zoning and building requirements. Early knowledge by the applicant of all the requirements, both state and local, for obtaining a day care license can expedite the licensing process by eliminating costly false starts and mistakes which must be corrected later. There is a need for a standard format for presentation of requirements to potential applicants.

Implications for quality Child Care

4. State and local agency standards for day care licensing have been developed by different people under different circumstances for different reasons, and very often without consideration of parallel or conflicting requirements of other agencies. This piecemeal approach, so often used in the past, is simply too inefficient and costly to be allowed to continue unchecked. In most cases, it is the applicant who must spend the time and pay the cost of assembling a comprehensible view of the divergent requirements he must meet. The applicant must resolve the conflicting requirements to the agreement of all agencies requiring compliance with their rules.

5. Some requirements are unrealistically stringent. Local requirements considered over-stringent by operators of day care facilities result more from default than design; these requirements often occur when all day care homes and/or centers are classed categorically with a group of other uses with higher risk factors resulting in a need for higher safety standards than are necessary for day care facilities. Many of the requirements considered unreasonable by operators of day care facilities could be changed if local officials were properly approached and provided with the information needed to improve the local requirements.

6. It would appear that several aspects of the day care licensing administrative procedures will severely inhibit rapid expansion of national day care programs. The major factors appear to be:

a. Existing standards are not interpreted uniformly from one year to the next and from one geographic area to the next due to staff turnover and inadequate training programs.

b. Central control of the speed of licensing is weakened by the layers of local zoning, building, etc., requirements, which are out of the jurisdiction of the licensing agency, and by reliance on the cooperation of inspecting agencies which give low priority to day care inspections.

7. Some inspectors tend to apply different criteria for evaluating facility and program for white minority day care centers.

8. On the basis of statements by the licensing agencies in all six states visited in the follow-up survey, a major concern of all licensing agencies is the lack of strong legal teeth they need to revoke the license of a "bad" day care facility and keep the facility closed.

9. The types of day care now e[illegible]ded in state day care statutes and regulations range from care provided to a child by a rela[illegible]e to facilities operated by governmental agencies. In some

ree

RECOMMENDATIONS

1. To ensure cooperation and coordination of the day care licensing functions of the state licensing agency and "other" state and local agencies involved in evaluating day care facilities, the state statute authorizing day care licensing should provide for the establishment of either a permanent or ad hoc committee to review and coordinate day care licensing regulations and procedures. The committee should include representation from all the state agencies which assist the licensing authority and should be required periodically to update and improve the regulations and licensing process.
Annual coordinative meetings between the state licensing agency and assisting state agencies should be required in all instances, including those states where licensing agency staff are assigned to accomplish liaison between the licensing agency and state and local inspecting agencies.

2. State day care legislation should give the state licensing agency adequate authority to deny or revoke licenses and to initiate action in the courts against those facilities which continue to operate after their licenses have been denied or revoked.

3. Performance standards which allow for alternatives in meeting requirements should be used where possible in both state and local regulations to allow the greatest flexibility to licensing workers and inspectors in evaluating a day care facility for licensing.

4. Written guidelines or manuals of interpretation should be developed for use by inspectors in applying specific state and local codes to day care. The guidelines and manuals should be developed by the state or local inspecting agency in concert with the state licensing agency and should consider incorporation of national models.

5. Workshops for all state and local inspectors of day care facilities should be given at regular intervals to train, compare procedures, and evalutate the present system. Training programs could be conducted by the Office of Child Development to train a cadre to state trainers in keeping with manuals and materials prepared by the Office of Child Development that would assure some degree of uniformity in coordination between agencies, reducing duplication and conflict.

6. Provisions for use of modular units for day care facilities should be included in the industrialized building unit (factory-built housing) laws of the states which presently have such legislation in force. The state licensing agency should advocate passage of an industrialized building unit law providing for day care use in those states which do not yet have such legislation.

7. For each type of day care facility, sets of materials should be prepared for potential day care applicants containing state regulations, a copy of all forms used by inspectors, and a list of steps the applicant needs to follow to complete the licensing process.

8. Licensing specialist positions should be created within the licensing agency to provide agency expertise in the health and sanitation and fire safety and building codes aspects of day care licensing. This could be accomplished in different ways. In one approach, a licensing specialist trained in child development would recommend program consultation where needed, but his primary job would be to license the physical facilities to house a day

care program meeting minimum state standards. He would be familiar with all local code requirements that must be met by a day care facility in order to obtain a license. He would be trained to help applicants through the maze of local building, zoning, business license, etc., requirements, arrange for team inspections to eliminate conflicting recommendations by inspectors, and otherwise speed up licensing procedure. The licensing specialist could also reinspect for facility correction of minor deficiencies noted in facility inspections by other agencies, alleviating the need for reinspection by local inspectors.
Another approach would be to establish specific higher level fire and safety and health and sanitation liaison positions within the state licensing agency. These specialists would coordinate the physical facility inspection aspects of licensing for all day care facilities licensed by the state.
In both approaches, interagency agreements should be drawn up providing for reimbursement by the licensing agency for day care facility inspection costs.

9. Consideration should be given to extending the period of license for all day care facilities to two years, assuming some systematic monitoring on at least an annual basis be accomplished by the appropriate inspecting agencies.

10. The "registration" of family day care homes should be studied to determine whether this would speed the supply of day care facilities without loss of concern or protection for the child in care.

15 16 11. Uniform definitions and models for treatment of day care homes and day care centers should be developed and incorporated into nationally used model building and fire safety codes to eliminate the disparity between these national codes in the classification and resultant structural and equipment requirements.

12. State licensing agencies and the Office of Child Development should develop an information program to educate local officials and the general public on the advantages and desirability of licensed day care facilities over unlicensed facilities.

13. The prevailing viewpoint of the states is that the standards need to be reviewed and changed. In all likelihood, the changes presently anticipated by the states will result in some slight localized improvements, but the basic problems will remain. Further, there is no national "State Licensing Association" to serve as a forum for exchange of information and coordinated development of procedures among the states. It, therefore, would seem imperative that the Federal Government take a leadership position and prepare proposed model day care standards and administrative procedures for the states to consider during this critical period of change, and encourage formation of a national association of licensing personnel.

	DAY CARE CENTER DIRECTOR	DAY CARE CENTER TEACHER	FAMILY DAY CARE HOME OPERATOR
ALABAMA	+	HS	NS
ALASKA	HS	NS	(NS)
ARIZONA*	NS	NS	NS
ARKANSAS	HS	NS	(NS)
CALIFORNIA	+	+	NS
COLORADO	+	HS	NS
CONNECTICUT	+	HS	NS
DELAWARE	+	+	(NS)
FLORIDA	NS	NS	NS
GEORGIA	HS	HS	NS
HAWAII	+	+	NS
IDAHO**	NS	NS	NS
ILLINOIS	+	+	NS
INDIANA	+	+	NS
IOWA	+	+	NS
KANSAS	+	NS	NS
KENTUCKY	NS	NS	NS
LOUISIANA*	NS	NS	NS
MAINE	+	HS	(NS)
MARYLAND	NS	NS	NS
MASSACHUSETTS*	+	+	NS
MICHIGAN	+	+	NS
MINNESOTA	NS	NS	NS
MISSISSIPPI* **	+	+	NS
MISSOURI	+	NS	(NS)
MONTANA	NS	NS	NS
NEBRASKA	+	+	NS
NEVADA*	+	NS	N/AP
NEW HAMPSHIRE	HS	HS	NS
NEW JERSEY*	+	+	N/AP
NEW MEXICO	NS	NS	NS
NEW YORK	NS	NS	NS
NORTH CAROLINA*	NS	NS	(NS)
NORTH DAKOTA	HS	NS	(NS)
OHIO*	+	HS	NS
OKLAHOMA	HS	HS	NS
OREGON*	NS	NS	N/AP
PENNSYLVANIA	+	+	NS
RHODE ISLAND	+	+	NS
SOUTH CAROLINA	NS	NS	(NS)
SOUTH DAKOTA	+	+	NS
TENNESSEE	+	+	NS
TEXAS	HS	NS	NS
UTAH	HS	NS	NS
VERMONT	NS	NS	(NS)
VIRGINIA	+	HS	NS
WASHINGTON	+	NS	NS
WEST VIRGINIA*	HS	NS	NS
WISCONSIN*	+	+	N/AP
WYOMING	+	+	NS
DISTRICT OF COLUMBIA	NS	NS	NS

+	Some college or equivalent experience
HS	High school
NS	Not specified
N/AP	not applicable
*	No mandatory licensing requirement for family day care homes
**	No mandatory licensing requirement for day care centers
•	No licensing law for homes
( )	Also a requirement for group day care homes

FEDERAL INTERAGENCY DAY CARE REQUIREMENTS

INTRODUCTION

The legislative mandates of the Economic Opportunity Amendments of 1967 require that the Secretary of Health, Education, and Welfare and the Director of the Office of Economic Opportunity coordinate programs under their jurisdictions which provide day care so as to obtain, if possible, a common set of program Standards and regulations and to establish mechanisms for coordination at State and local levels. The Secretary of Labor has joined with the Director of the Office of Economic Opportunity and the Secretary of Health, Education, and Welfare in approving these Standards. Accordingly, this document sets forth Federal Interagency Requirements which day care programs must meet if they are receiving funds under any of the following programs:

Title IV of the Social Security Act

Part A--Aid to Families With Dependent Children

Part B--Child Welfare Services

Title I of the Economic Opportunity Act--Youth Programs

Title II of the Economic Opportunity Act--Urban and Rural Community Action Programs

Title III of the Economic Opportunity Act

Part B--Assistance for Migrant, and other Seasonally Employed, Farmworkers and Their Families (These Federal Interagency Requirements will not apply in full to migrant programs until July 1, 1969.)

Title V of the Economic Opportunity Act

Part B--Day Care Projects

Manpower Development and Training Act

Title I of the Elementary and Secondary Education Act (Programs funded under this title may be subject to these Requirements at the discretion of the State and local education agencies administering these funds.)

These Requirements will be supplemented by a series of Federal Interagency Recommendations which are not mandatory but represent highly desirable objectives. The Requirements and Recommendations taken together constitute the Federal Interagency Day Care Standards.

As a condition for Federal funding, agencies administering day care programs must assure that the Requirements are met in all facilities which the agencies establish, operate, or utilize with Federal support. If a facility does not provide all of the required services, the administering agency must assure that those that are lacking are otherwise provided.

Administering agencies must develop specific requirements and procedures within the framework of the Federal Interagency Requirements and Recommendations to maintain, extend, and improve their day care services. Additional standards developed locally may be higher than the Federal Requirements and must be at least equal to those required for licensing or approval as meeting the standards established for such licensing. Under no circumstances, may they be lower. It is the intent of the Federal Government to raise and never to lower the level of day care services in any State.

The Interagency Requirements will be utilized by Federal agencies in the evaluation of operating programs.

Application of Requirements

These Requirements cover all day care programs and facilities utilized by the administering agencies which receive Federal funds, whether these facilities are operated directly by the administering agencies or whether contracted to other agencies. Such programs and facilities must also be licensed or meet the standards of licensing applicable in the State. Day care may be provided:

In a day care facility operated by the administering agency.

In a day care facility operated by a public, voluntary, or proprietary organization which enters into a contract to accept children from the administering agency and to provide

APPLICATION AND ReCERTIFICATION OF DAY CARE CENTERS

(In regard to compliance with federal interagency day care requirements)

State of Michigan

Department of Social Services

INSTRUCTIONS:

This application form to be completed and signed by operator, president, or chairman and returned to your day care consultant for approval. (For any program funded in whole or in part, directly or indirectly, under: Title IV of the Social Security Act; Title I, II, III, V of the Economic Opportunity Act; or Title I of the Manpower Development and Training Act.)

NAME OF CENTER

ADDRESS OF CENTER *(Number, Street, City, & Zip Code)*

COUNTY

TELEPHONE NO.

ADDRESS OF OPERATOR

OPERATOR'S TELEPHONE NO.

HOURS OF OPERATION

ATTACH PLANS FOR:

1. Equipment replacement (Item 9) ________
2. Health and nutrition (Items 13-20 incl.) ________
3. Staff training (Item 21) ________
4. Career progression (Item 22) ________
5. Policy advisory committee (Item 24) (More than 40 children) ________
6. Personnel policies (Item 26) ________

A. GROUPING OF CHILDREN (Space provided for checking or comment by the operator, president, or chairman. If more space is required, insert additional sheets)

(1) 2½ through 3 year olds: Number of groups ________ Number children in group ________ Number of paid adults ________ Number of volunteers ________

(No more than 15 in one group, with one adult and sufficient assistants so that ratio is one adult to five children.)

(2) 4 through 5 year olds: Number of groups ________ Number children in group ________ Number of paid adults ________ Number of volunteers ________

(No more than 20 in one group, with one adult and sufficient assistants so that ratio is one adult to seven children.)

(3) Mixed age groups 2½ through 5 year olds: Number of groups ________ Number children in group ________ Number of paid adults ________ Number of volunteers ________

(No more than 15 in a group, with one adult and sufficient assistants so that ratio is one adult to five children.)

(4) 6 through 14 year olds: (Other than normal school hours) Number of groups ________ Number children in group ________ Number of paid adults ________ Number of volunteers ________

(No more than 25 in a group, with one adult and sufficient assistants so that ratio is one adult to each ten children.) See Section I, Federal Interagency Day Care Requirements, September 1968.

COMMENTS:

B. ENVIRONMENTAL NEEDS

(5) The day care center is convenient to the home or work site of parents. (See Section II-A, 2b, page 8) ☐ Yes ☐ No

COMMENTS:

(6) The center provides equal opportunities for people of all racial, cultural, and economic groups including compliance with Title VI of the Civil Rights Act of 1964. (See Section II-A, pages 7-8) ☐ Yes ☐ No

COMMENTS:

(7) The center meets the requirements as provided within the licensing standards for health and fire safety. (See Section II-B, page 8) ☐ Yes ☐ No

COMMENTS:

(8) Day care center meets space and equipment requirements established by Department of Social Services in "Nursery Schools and Day Care Centers," Section V, Informational Pamphlet 8, pages 6-7, Rules 8, 9, 10. (See Section II-C, page 9, and Section III-4, page 10) ☐ Yes ☐ No

COMMENTS:

(9) The center has an established plan for adding to and replacing equipment. ☐ Yes ☐ No
Attach plan.

COMMENTS:

C. EDUCATIONAL SERVICES

(10) The educational activities are under the supervision and direction of a staff member trained or experienced in child growth and development. (See Section III-2, page 9) ☐ Yes ☐ No

COMMENTS:

(11) The daily activities for each child are designed to develop a positive self image and to enhance his social, cognitive, and communication skills. (See Section III-5, page 10) ☐ Yes ☐ No

COMMENTS:

D. SOCIAL SERVICES

(12) (a) The center has received a copy of the Michigan Department of Social Services summary statement regarding the purchase of day care service. (See Section IV, page 10) ☐ Yes ☐ No

(b) The center is aware of and uses, when required, social services which are available through the county department of social services for those children funded by the Department. ☐ Yes ☐ No

COMMENTS:

E. HEALTH AND NUTRITION SERVICES

(13) There is a physician supervising the health and safety needs of the children. (See Section V-1, page 11)
☐ Yes ☐ No

IF YES, NAME OF PHYSICIAN	ADDRESS	TELEPHONE

COMMENTS:

(14) The day care center is providing for entrance and periodic medical and dental examinations. (See Section V-2, page 11) ☐ Yes ☐ No

COMMENTS:

(15) Arrangements have been made for medical and dental care and other health-related treatment including immunizations for each child. (See Section V-3 & 5, page 11) ☐ Yes ☐ No

COMMENTS:

(16) The day care center provides a daily evaluation of each child for indications of illness. (See Section V-4, page 12)

☐ Yes ☐ No

COMMENTS:

(17) The day care center has developed an emergency medical plan. (See Section V-6, page 12)

☐ Yes ☐ No

COMMENTS:

(18) The day care center provides adequate and nutritious meals and snacks through the consultation of a qualified nutritionist or food specialist. (See Section V-7, page 12) ☐ Yes ☐ No Attach sample menu for week.

IF YES, NAME	ADDRESS	TELEPHONE

COMMENTS:

(19) All staff members have periodic assessments of their physical and mental competence. (See Section V-9, page 13)

☐ Yes ☐ No

COMMENTS:

(20) Adequate health records are kept on staff and children. (See Section V-10, page 13)

☐ Yes ☐ No

COMMENTS:

F. TRAINING OF STAFF

(21) The day care center provides for the orientation and continued inservice training and supervision of all staff - professionals, nonprofessionals, and volunteers - in general program goals as well as specific program areas, i.e., nutrition, health, child growth and development, including the meaning of supplementary care to the child, educational guidance and remedial techniques, and the relationship of the community to the child. (See Section VI-1, page 13)
☐ Yes ☐ No
Attach plan.

COMMENTS:

(22) The day care center provides career progression opportunities which include job upgrading and work-related training and education for all the nonprofessional staff. (See Section VI-3, page 14) ☐ Yes ☐ No
Attach plan.

COMMENTS:

G. PARENT INVOLVEMENT

(23) The center offers opportunities for parents to be involved in the program and to observe their children in the center. (See Section VII-1 & 2, page 14) ☐ Yes ☐ No

COMMENTS:

(24) The day care center having more than 40 children has a policy advisory committee consisting of at least 50% parents or parent representation, making meaningful decisions as outlined in Section VII-3, page 14. ☐ Yes ☐ No
Attach plan.

COMMENTS:

H. ADMINISTRATION AND COORDINATION

(25) Day care center has developed written personnel policies. (See Section VIII-1, page 15) ☐ Yes ☐ No

COMMENTS:

(26) The methods of recruiting and selecting personnel insure equal opportunity for all interested persons to file an application and have it considered within reasonable criteria. (See Section VIII-A, 2& 4, pages 15- 16) ☐ Yes ☐ No
Attach plan.

COMMENTS:

(27) The day care center has developed and made public policies and procedures governing program services, intake, financing, and community relations. (See Section VIII-A-5, page 16) ☐ Yes ☐ No

COMMENTS:

List your daily rate charged to the general public. $____________________________

NOTE: The rate for state/federally-supported children cannot be higher than for privately-supported children in the same center.

Application is hereby made for certification of compliance with federal interagency day care requirements.

Operator
As President, I hereby certify and pledge to implement the plans outlined in the application.
Chairman

SIGNATURE	TITLE	DATE

TO BE COMPLETED BY DAY CARE CONSULTANT

☐ Recommended for certification.

☐ For recertification.

☐ Not recommended for certification at this time.
Indicate requirements not met, by item numbers:

____
Day Care Consultant
State Department of Social Services

____
(Date)

Richard Ruopp, abt Assoc. / Ser. Nat. Day Care Study 74-77

Exit 50% total from fed. be in labor force by 1980

Hypoth

Day Care & Child Development REPORTS

APR 15 1975

Editor: Joyce F. Goldman
Executive Editor: Lawrence Feckley Jr.

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WASHINGTON [illegible]: It isn't just fiscal conservatives who are perplexed by the course of federal spending and budget priorities. . . . The House and Senate Budget Committees and the White House are nearing basic agreement on the shape of the federal budget for the fiscal year beginning July 1: the size is somewhere between $356 billion and $366 billion with a deficit of anywhere from $55 billion to $68 billion -- perhaps more, depending on the revenue projections that are used. . . . Children's advocates are bound to wonder why, given these astronomical sums, there isn't room for a little more for children's services. . . . But the administration continues to snipe at social services programs, as Vice President Rockefeller did last week when he blamed deficit domestic spending for inflation, which -- he reminded an audience -- ruined post-World War I Germany. But Rockefeller said little about defense spending, knowing that President Ford was ready to ask Congress for another billion dollars to pour into Vietnam.

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HEW TO ISSUE PROPOSED REGULATIONS TODAY FOR DAY CARE AND SOCIAL SERVICES PROGRAM

Proposed rules for the new federal day care and social services program will be issued by HEW upon publication in today's Federal Register.

The regulations will apply to the new services program for welfare recipients and low-income individuals and families, known as Title XX. The new program will replace the current program, Title IV-A of the Social Security Act, which has been in effect since 1967. The new program begins October 1.

Under the new program, the federal government will share the cost of day care and other social services with the states.

Following are highlights of the proposed rules, from an advance copy obtained by DCCD Reports.

Staffing

Staffing ratios for children under the age of 3 in day care centers would require one adult for every child under 6 weeks of age; one adult for every three children, 6 weeks to 18 months old; and one adult for every four children 18 months to 36 months old.

Currently, federal standards, which apply to centers serving children

• Subscription price $75 per year • [illegible]

whose tuition is supported by federal funds, do not set staffing ratios for children under the age of 3 in centers.

The law establishing the new program authorized the secretary of HEW to issue staffing ratios for these children. The issue caused controversy in the day care community. The Child Welfare League of America urged one adult for every two children under 3 and the American Academy of Pediatrics a ratio of 1 to 4.

The proposed regulations, which also spell out requirements for state plans, federal participation, purchase of service and administrative expenses, leave most program operation and control up to the states. The regulations closely follow the law enacted by Congress late last year establishing the new program.

This conformity to the law and the briefings HEW officials have been holding with members of Congress indicate that HEW wants to avoid another dispute with Congress over the social services program.

In 1973, HEW issued regulations for the current services program. Critics called the rules "repressive" and said they would curtail eligibility and services. Following widespread criticism of the proposed rules, Congress suspended them and rewrote the social services program. The dispute between HEW and Congress lasted nearly two years, during which time federal funding was uncertain because of the confusion surrounding the program.

History

The staffing ratios in the proposed rules apply to programs paid for with Title XX funds. Other day care programs administered by HEW, such as Title IV-B, Head Start, and the Work Incentive Program, will continue to operate under the existing standards which do not contain staffing requirements for children under age 3.

The proposed rules also require that family day care homes, serving children (infant to age 6), allow no more than two children under age 3 and no more than five children under age 14, including the family day care mother's own children.

~~Other revisions in the federal standards, spelling out ratios for school-age children and [illegible] but not requiring the inclusion of educational services in day care programs, were part of the law passed by Congress.~~

The proposed rules leave open the questions of who has responsibility to see that the federal standards are monitored and enforced -- HEW or the states -- and whether monitoring and enforcement can be paid for with federal funds.

The public has 30 days to comment on the proposed rules. Final HEW rules must be out in time for states to draw up their plans, publish them for public review, and be adopted in final form, before the program goes into effect October 1.

The regulations also:

- Allow federal funds to be used to train providers of day care, including family day care mothers. [Training

- Allow states to impose fees for services to welfare recipients and

APPENDIX B

09/21/73 BG-05

STATE OF MICHIGAN

William G. Milliken, Governor

DEPARTMENT OF SOCIAL SERVICES

300 S. CAPITOL AVE., LANSING, MICHIGAN 48926

R. BERNARD HOUSTON, Director

PIONEER PRE SCHOOL DAY CARE INC
15901 W 7 MILE
DETROIT MI 48235

CA82519

Recertification effective 10-12-73 for
25 chn. 2½ - 6. Rate $5.20

RE: NOTICE OF FEDERAL INTERAGENCY STATUS

PIONEER PRESCHOOL DAY CARE INC

IS LISTED AS A CERTIFIED CENTER WITH RESPECT TO THE FEDERAL INTERAGENCY DAY CARE STANDARDS.

PAYMENTS FOR CARE MAY THEREFORE BE PROVIDED TO ELIGIBLE CHILDREN BY THE MICHIGAN DEPARTMENT OF SOCIAL SERVICES AT THE CHARGE AGREED UPON WITH THE CLIENT, HOWEVER, CHARGES MAY NOT EXCEED THE MAXIMUMS STATED BELOW FOR THE TYPE OF CENTER, NOR MAY THEY EXCEED THE RATE CHARGED THE GENERAL PUBLIC.

CERTIFIED	- DAY CARE CENTERS AND NURSERY SCHOOLS MEETING ALL FEDERAL INTERAGENCY DAY CARE REQUIREMENTS ARE LISTED AS CERTIFIED CENTERS AND MAY BE REIMBURSED UP TO $5.70 PER DAY FOR FIVE OR MORE HOURS OF CARE AND UP TO $2.85 FOR LESS THAN FIVE HOURS.
LIMITED	- CERTAIN CENTERS IN OPERATION PRIOR TO JANUARY 1, 1969, AND MEETING ALL FEDERAL INTERAGENCY STANDARDS OTHER THAN THE STAFFING RATIO ARE LISTED AS LIMITED CENTERS AND MAY BE REIMBURSED UP TO $4.50 PER DAY FOR FIVE OR MORE HOURS OF CARE AND UP TO $2.25 FOR LESS THAN FIVE HOURS.
WAIVERED	- A LICENSED CENTER WHICH ACCEPTS LESS THAN 15% OF THEIR PRESENT OR ANTICIPATED ENROLLMENT IN STATE PAID CHILDREN, MAY RECEIVE, UPON APPLICATION, A WAIVER OF FEDERAL INTERAGENCY STANDARDS. THESE ARE LISTED AS WAIVERED CENTERS AND MAY BE REIMBURSED UP TO $4.50 PER DAY FOR FIVE OR MORE HOURS OF CARE AND UP TO $2.25 FOR LESS THAN FIVE HOURS.

ANY CONTEMPLATED CHANGES IN THE CENTER OPERATION WHICH COULD AFFECT COMPLIANCE WITH THE ABOVE STATUS SHOULD BE REPORTED TO LICENSING CONSULTANT IN ADVANCE SO THAT THEY MAY BE REVIEWED PRIOR TO THE CHANGE.

MICHIGAN DEPARTMENT OF SOCIAL SERVICES
- Wayne Co. DSS

C.C. COUNTY OFFICE
FIELD REPRESENTATIVE

APPENDIX C

Sandra Panetta
Graduate Student
University of Northern Colorado
Ele. Ed.: Early Childhood Ed.
Home # 320-6670

PURPOSE: Define the concept "quality" child care center. My experience with this term has been that of vagueness. Various groups use the term, yet none have defined this concept precisely.

PROCEDURES: Survey parents, directors, educators and the Department of Social Services personnel to identify the characteristics of a quality child care center. The questionnaire should also function as an instructional tool by encouraging people to consider the varied aspects of child care centers.

USE OF THE RESULTS: The results will be tabulated to determine the degree of consensus among the various groups. Results will be sent to the various centers involved in the survey. The results will also be examined in the context of existing research dealing with optimal environments for young children.

PROCEDURE FOR IMPLEMENTING THE SURVEY

1. Directors of the centers will hand out the questionnaires to the parents.
2. Allow the parents to take the questionnaires home, fill them out and return them after 5-7 days.
3. Parents' questionnaires are to be placed in the large manila folder when returned to the Centers.
4. I will pick-up the folder(with the returned questionnaires) one week from the date when they were brought to the Center.
5. Directors please emphasize that respondents' names are not needed; just completed questionnaires.
6. A complete copy of the findings will be given to each center to share with the parents.

Your cooperation is genuinely appreciated!!!

THANK YOU

Sandra Panetta

The University of Northern Colorado
GREELEY, COLORADO 80639

College of Education
Department of Elementary Education and Reading 303/351-2702
Reading Center 303/351-2908
Early Childhood Studies 303/351-3075

February 12, 1975

As a former director and head teacher of my own child care center, (someday) parent, and graduate student in the Early Childhood Education Program at the University of Northern Colorado, I am conducting a survey to determine what goes into making a "quality" child care center. My premise for the need for such a survey is that the term "quality" child care is generally vague. My intent is to establish some degree of precision for the term.

The enclosed questionnaire will assist me in identifying the characteristics of a quality child care center covering the age group 2½-5 years of age. Your response will be extremely helpful and appreciated. Respondents' names are not needed. Responses will be kept confidential.

Please fill out the enclosed form and return it to:

Mrs. Sandra J. Panetta
C/O Dr. Doug Burron
Center for Research and Development
Early Childhood Education
University of Northern Colorado
Greeley, Colorado 80639

Thank you,

Sandra J. Panetta

Sandra J. Panetta
Graduate Student

Doug Burron

Doug Burron
Associate Professor
of Elementary Education

Please answer the questionnaire as though you had been given unlimited financial resources to create a quality child care center.

THE CHILD CARE CENTER

1. What should the primary functions of the center be?
(Rank in order of importance: 1-Most Important—4 Least Important.)

___Child Development
___Custodial Care
___Readiness for School
___Other______________________
Please Specify

2. List the aspects of a child care center which you consider to be important.

Indoor (size of the room, appearance, etc.)

Outdoor(appearance, climbing materials, etc.)

3. How should the center be funded?

___Parent Fees
___Scholarships
___Other________________
Please Specify
___Federal-State Tuition Payments
___Parental payment based upon a sliding scale according to income with the Federal-State Governments paying the remainder

4. Who should determine how the money is spent?(Parent Response Optional)

___Board of Directors
___Parent-Advisory Board
___Financial Administrator
___Educational Director
___Other______________________
Please Specify

PROGRAM

1. Should the child care center have specific educational goals?_Yes _No
If yes, rank according to degree of importance(1-Most Imp.—7Least).

___Language Development
___Reading Readiness
___Math
___Creativity
___Physical Development
___Social & Emotional Development
___Other____________________
Please Specify

2. How should the children be grouped?

___Age
___Sex
___Cross-Aged
___Ability
___Other__________________
Please Specify

3. What should the adult/child ratio be?

___2½-3 yr. olds a 1 adult/5 children
___2½-3 yr. olds 1 adult/8 children

___3-4 yr. olds 1 adult/5 children
___3-4 yr. olds 1 adult/10 children

___4-5 yr. olds 1 adult/7 Kids
___4-5 yr. olds 1 adult/12 Kids

___2½-5 yr. olds 1 adult/5Kids
___2½-5 yr. olds 1 adult/10 Kids

4. What should be considered when purchasing equipment?

5. Should the children go on field trips? __Yes __No

If yes, what type and how often?

STAFF

1. What qualifications should the ~~Executive~~ Leader Director have? (Parent Res. Op.)

__2 yr. College in Child Dev.
__2 yr. College in Child Dev. and Business Administration
__B.S. or B.A. in Child Dev./ Ele. Ed.: Early Child. Ed.
__B.S. or B.A. in Bus. Admin.
__B.S. or B.A. in Elementary Ed.
__Other________________
Please Specify

2. What qualifications should the Educational Director have?

__2 yr. College in Child Dev.
__B.S. or B.A. in Child Dev.
__B.S. or B.A. in Ele. Ed.: Early Childhood Ed.
__Other________________
Please Specify

3. What type of minimal training should the Teacher have?

__2 yr. College in Child Dev.
__B.S. OR B.A. In Child Dev.
__B.S or B.A. in Ele. Ed.: EARLY CHILDHOOD ED.
__Other________________
Please Specify

4. What qualifications should the Teacher's Assistant have?

Educational

Personal

5. List other staff members which you feel should be part of the center.

Professional

Non-Professional

6. What type of training programs should the center have for its staff?

EMERGENCY-HEALTH-FOOD

1. What should the emergency policies and procedures of a child care center be?

2. What annual health services should the center provide?

3. Should the center cooperate with other community agencies? ___Yes ___N

If yes, in what capacity?

___As a referral center for parents

___As a location where other services can be brought: health examinatio dental examine and care, screening for vision & hearing,etc.

___Other________________________________
Please specify

4. How many meals should be served at the center?

5. List a menu (including snacks & meal(s)) for one day.

6. How should the lunches be paid for?

___Parent Fees

___Other________________________________
Please specify

___FEDERAL-STATE SUBSIDY

___Both

7. How much money should be spent per child/week on food?

___$2.50/child/wk.

___$6.25/child/wk.

___$3.75/child/wk.

___Other________________________
Please specify

___$5.00/child/wk.

What factors should be included in this rate?

FINAL POINTS

1. What role should parents play in the educational program?

2. What type of an evaluation system should the center have?

___Staff evaluation of the total program

___Dirtector's evaluation of the center's ability to meet stated goals

___Parent evaluation of the total services provided

___Outside evaluation of the total program

___Other____________________________

3. What type of a child care center best meets your needs?(PARENT ONLY)

___Headstart Program (½ Day)

___Private large day care corporation

___Privately owned &operated child care center

___Nonprofit , private child care center

___Nonprofit Community child care center

___Parent-Cooperative child care center

___Other______________________________
Please specify

4. What do you consider to be the single most important characteristic of a quality child care center?

EXTRA!!!

What type of infant-toddler care would best suit your needs?(Parent Only)

___Professionally trained child sitter

___Infant-Toddler Center for children 6weeks-2½yr.

___Home Care Center located in the neighborhood

___ Parent-Cooperative

___Other_______________________________
Please specify

Mrs. Sandra Panetta

Center for Research
and Development: Early
Childhood Education
University of Northern Col.
Greeley, Colorado 80639

E Dear Director:

This is a brief note to remind you to complete and return the questionnaire you received concerning quality child care. Your ideas are important and needed. Please return the questionnaire no later than Friday, March 21, 1975.

Thank you,

Sandra Panetta

Sandra Panetta,
Graduate Student

[illegible]
Early Childhood Education
University of Northern Colorado
Greeley, Colorado 80639
April 8, 1975

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Kentview Community Preschool
1980 Dahlia
Denver 80220

Dear Parents:

I must call upon you for assistance again. The response level for the questionnaires I sent out concerning Quality Child Care was minimal-18% return. Therefore I need at least 75 families who will be willing to accept, complete and return the questionnaire.

The information obtained in this questionnaire can be helpful to the child care movement; this type of research can be instrumental in educating legislators, educators and students working in the area of early childhood education and child development. The WEEK OF THE YOUNG CHILD, April 6-12 is an appropriate time to ask for HELP.

If you are interested, then please complete and return this letter (by April 11) to:

Jean Dale,
Director
Kentview Community Preschool.

I will then mail a questionnaire to you.

Thank you.

Sandra [illegible]

NAME____________________________

ADDRESS____________________________ ZIP__________

PHONE NUMBER____________________

APPENDIX D

TABULATION OF PARENTAL RESPONSES: THE CHARACTERISTICS OF A QUALITY CHILD CARE CENTER

TABLE I

AREAS	RESPONSES	
The Center	No.	%
Primary Function		
Child Dev.	16	76 ★
School Re.	1	5
Custodial Care	–	–
Other	4	19
No Response	–	–
Order of Importance		
CD/SR/CC/O	14	67 ✓
SR/CD/CC/O	–	–
CC/CD/SR/O	–	–
No Response	–	–
★ Other	7	33
Physical Plant		
Outdoor		
Size	1	3
✓ Safety	5	15
Appearance	3	9
✓ Type of Equipment	10	29 ★
Fence	3	9
Types of Surfaces	3	9
No Response	9	26
Indoor		
✓ Size	11	31 ✓
✓ Appearance	10	28 ✓
Equipment	4	11
Safety	2	5
Maintenance	3	8
Kitchen	–	–
Meets Fire and Health Codes	–	–
No Response	6	17
Funding		
Parent Fees	5	24
Scholarships	–	–
Federal-State Tuition	4	19
Parental Payment (Sliding Scale)	7	33 ✓
Other	4	19
No Response	1	5
Who Determines Expenditures		
Board of Directors	1	5
Parent-Advisory Board	6	28 ✓
Financial Administrator	2	10
Educational Director	5	24
Other	6	28
No Response	1	5

* Black - Middle Class : Private - Franchise Center

TABLE I
CONTINUED

AREAS	RESPONSES	
PROGRAM	No.	%
Specific Ed. Goals		
Yes	20	95 ✓
No	1	5
No Response	—	-
Primary Goal		
Soc.-Emo.	10	48 ✓
Phy.-Dev.	1	5
Lang.-Dev.	3	14
Read.-Readiness	3	14
Math	—	-
Other	3	14
No Response	1	5
Order of Importance		
Soc.-Emo./P.D./...	6	28 ✓
Lang. Dev./S-E/...	1	5
RR/LD/...	0	0
PD/S-E/...	1	5
Math/RR/...	—	-
No Response	1	5
*Other	12	57
Grouping of Children		
Age	10	48 ✓
Sex	—	-
Ability	5	24
Cross-Aged	4	19
Other	2	9
No Response	—	-
Adult/Child Ratio		
2½-3yr. 1 adult/5 Children	16	76 ✓
2½-3yr. 1 adult/8 Children	5	24
No Response	—	-
3-4 yr. 1 adult/5 Children	12.5	60 ✓
3-4 yr. 1 adult/10 Children	6.5	31
No Response	2	9
4-5 yr. 1 adult/7Children	9	43
4-5 yr. 1 adult/12 Children	11	52 ✓
No Response	1	5
2½-5 yr.1 adult/5 Children	12	57 ✓
2½-5 yr.1 adult/10 Children	4	19
No Response	5	24

*- SE/LD 4 / LD/PD-1 / LD/RR 1 / RR/SE-3 / O/SE-3

TABLE I
CONTINUED

AREAS	RESPONSES	
PROGRAM	No.	%
Factors Aff. Eq. Pur.		
Hard Equipment	–	-
Manipulative Mat.	1	2
✓ Age-Ability	11	24 ✓
Need	2	4
✓ Safety	15	31 ✓
Sturdiness & Quality	5	10
Commercial Programs	–	-
✓ Use	12	25 ✓
Number of Children	–	-
No Response	–	-
Cost	2	4
Trips		
Yes	21	100 ✓
No	–	-
No Response	–	–
Frequency		
1/wk.	–	-
1/mo.	7	33 ✓
2/mo.	4	19
Often	1	5
No Response	9	43
Types		
Educational	6	28
Fun	–	-
Appropriate	1	5
Zoo, Museum, Bakery...	9	43 ✓
No Response	5	24

TABLE I
CONTINUED

AREAS	RESPONSES	
STAFF	No.	%
Qual.: Center Dir.		
2yr. College in Ch. Dev.	2	10
2 yr. College in Ch. Dev & Bus. Ad.	4	19
B.S. or B.A. in Bus. Admin.	2	10
B.S. or B.A. in Ele. Ed.	—	-
B.S. or B.A. in Ch. Dev. or Ele. Ed.: ECE	10	47 ✓
Other	-	-
No Response	3	14
Qual.: Ed. Dir.		
2 yr. College Ch. Dev.	1	4
B.S. or B.A. in Ch. Dev.	2	9
B.S. or B.A. in Ele. Ed.: ECE	16	74 ✓
Other	1	4
*No Response	2	9
Minimal Qual.: Teacher		
2 yr. College in Ch. Dev.	9	39 ✓
B.S. or B.A. in Ch. Dev.	4	17
B.S. or B.A. in Ele. Ed: ECE	7	31
Other	1	4
**No Response	2	9
Qual.: Teacher's Asst.		
Educational		
High of Some College	16	58 ✓
None	1	3
No Response	3	10
Experience	8	29
Personal		
Ability to work with staff, parents and children	3	14
Like Children	6	28 ✓
Willingness to Learn	1	5
Interest and Understanding of Children	5	24
No Response	6	29

* 1 Parent selected a category + added experience.
** 2 Parents rated 2 categories equally.

TABLE I
CONTINUED

AREAS	RESPONSES	
STAFF	No.	%
Other Staff Members		
Dietician	3	7
Speech Path.	1	2
Nurse	7	17★
Social Worker	—	-
Child Psych.	1	2
Doctor	2	5
Play-Monitor	—	-
Parent Asst.	1	2
Cook	6	15
Maintenance	6	15
Neighborhood Vol.	2	5
Elderly Vol.	—	-
No Response	12	30
Staff Training Programs		
Workshops & In-Service Training in Ch. Dev., ECE, Bi-ling...	10	45 ★
Course Work at College Level	2	9
Metings :Goals and Objectives	2	9
Observe Other Centers	—	-
Professional Library	—	-
★No Response	8	37

★ Parents listed more than one form.

TABLE I
CONTINUED

AREAS	RESPONSES	
EMER.-HEALTH-FOOD	No.	%
Policies		
Insur. For Children & Staff	–	–
Annual Physical Re. (Staff)	–	–
Annual Physical re. (Stud.)	–	–
First Aid Knowledge (Staff)	1	5
Emergency Forms on File	14	67 ✓
Family & Child's Health His.	–	–
Yearly Eq. Check	–	–
Meet State & Local Fire & Health Codes	–	–
Drug Administration	–	–
For Ill Children	–	–
No Response	6	28
Procedures		
Fire Drill	3	12
Daily Health Check	–	–
Emergency Plan	16	64 ✓
First Aid Steps	3	12
Food Storage & Prep.	–	–
No Response	3	12
3 **Annual Health Services Provided**		
None	2	5
Dental Exam	8	20 ✓
Physical	6	15
Vision Screening	9	23 ✓
Hearing Exam	9	23 ✓
Psych. Testing	1	2
Diagnostic Ev. for Dev. Dis.	–	
No Response	5	12
Center Coop. Other Comm. Ag.		
Yes	16	76 ✓
No	5	24
*Referral Center	9	37
*Location:Ser. Brought in	14	58 ✓
Other	1	5
No Response	–	–

* Parents tended to select both.

TABLE I
CONTINUED

AREAS	RESPONSES	
EMER.-HEALTH-FOOD	No.	%
Food		
Number Meals Served		
1-2 Snacks	13	62 ✓
2-2 Snacks	7	33
3-2 Snacks	—	—
No Response	1	5
Menu		
Snacks:Meet Nut. Re.	14	36
Lunch: Meet Nut. Re.	13	33
No Response	5	13
Breakfast	7	18
Payment		
Parent Fees	7	33
Federal-State Subsidy	4	19
Both	10	48 ✓
Other	—	—
No Response	—	—
Food Costs		
2.50/wk.	2	10
3.75/wk.	10	48 ✓
5.00/wk.	3	13
6.25/wk.	2	10
Other	4	19
No Response	—	—
Factors Included in Figure		
Nutritional Requirements	10	45 ✓
Serving Utensils	—	—
Cook's Salary	—	—
Kitchen Facilities	—	—
*Rising Food Costs	2	10
No Response	10	45

* Some parents listed more than one aspect.

TABLE I
CONTINUED

AREAS	RESPONSES	
FINAL POINTS	No.	%
Parental Role		
Interest & Knowledge of Goals	6	23
Cooperative	8	31 ✓
Supportive	3	11
Provide Input: Goals & Staff Selections	2	8
Establish Goals for Own Child	1	4
Establish the Center's Goals	–	-
No Response	6	23
Type of Evaluation		
Staff	1	5
Director's	5	25
Parental	1	5
Outside	2	9
All	2	9
Other	–	-
Combinations	8	38 ✓
No Response	2	9
Center Best Meeting Parent's Needs		
Headstart	2	7
Private Large Day Care Corp.	4	14
Privately Owned & Operated	5	19
Nonprofit, Privately Owned	7	27 ✓
Nonprofit, Community Center	4	14
Parent-Coop.	3	11
Other	1	4
*No Response	1	4
Center's Most Important Char.		
Staff Interest & Care	1	5
Staff Dedication	1	5
Staff's Qualifications	3	14
Teachers	–	-
Educational Pro.	3	14
Director	–	-
Food	–	-
**Other	10	48 ✓
No Response	3	14
***Parental Pre.: Infant - Toddler Care		
Profess. Trained Child Set.	6	25
Infant-Toddler Center	7	29 ✓
Home Care Center in Neigh.	5	21
Parent-Coop	–	-
Other	2	8
No Response	4	17

[illegible] two.

** Child's response to the center.

*** Parents selected more than one.

Total 15

Ask Staff

TABULATION OF DIRECTORS' RESPONSES: THE CHARACTERISTICS OF A QUALITY CHILD CARE CENTER

TABLE II

AREAS	RESPONSES	
The Center	No.	%
Primary Function		
Child Dev.	13	87 ✓
School Re.	—	-
Custodial Care	—	-
Other	2	13
No Response	—	-
Order of Importance		
CD/SR/CC/O	—	-
SR/CD/CC/O	—	-
CC/CD/SR/O	—	-
No Response	—	-
* Other	15	100
2 Physical Plant		
Outdoor		
✓Size	8	21
Safety	5	13
Appearance	2	5
✓Type of Equipment	11	20
Fence	2	5
✓Types of Surfaces	8	21
No Response	2	5
Indoor		
2✓Size	10	25
1✓Appearance	12	30
Equipment	8	21
Safety	1	2
Maintenance	3	7
Kitchen	—	-
Meets Fire and Health Codes	4	10
No Response	2	5
Funding		
Parent Fees	3	20
Scholarships	—	-
Federal-State Tuition	2	13
Parental Payment (Sliding Scale)	4	27
Other (Combinations)	5	33 ✓
No Response	1	7
Who Determines Expenditures		
Board of Directors	2	13
Parent-Advisory Board	1	7
Financial Administrator	—	-
Educational Director	7	47 ✓
Other	3	20
No Response	2	13

Same

* 6 CD/SR/SR/CC ; 7 CD/Parent's Needs/SR/CC

TABLE II
CONTINUED

N=15

AREAS	RESPONSES	
PROGRAM	No.	%
Specific Ed. Goals		
Yes	12	80✓
No	–	–
No Response	3	20
Primary Goal		
Soc.-Emo.	11	73✓
Phy.-Dev.	1	7
Lang.-Dev.	–	
Read.-Readiness	–	
Math	–	
Other	2	13
No Response	1	7
Order of Importance		
Soc.-Emo./P.D./...	5	33✓
Lang. Dev./S-E/...	–	–
RR/LD/...	–	–
PD/S-E/...	1	7
Math/RR/...	–	–
No Response	1	7
Other	8	53
Grouping of Children		
Age	3	20
Sex	–	–
Ability	3	20
Cross-Aged	6	40✓
Other	3	20
No Response	–	–
Adult/Child Ratio		
2½-3yr. 1 adult/5 Children	8	53✓
2½-3yr. 1 adult/8 Children	5	33
No Response	2	14
3-4 yr. 1 adult/5 Children	5	33
3-4 yr. 1 adult/10 Children	8	53✓
No Response	2	14
4-5 yr. 1 adult/7Children	7	47
4-5 yr. 1 adult/12 Children	7	47 > Same
No Response	1	6
2½-5 yr.1 adult/5 Children	5	33.3
2½-5 yr.1 adult/10 Children	5	33.3 > Same
No Response	5	33.3

TABLE II
CONTINUED

N=15

AREAS	RESPONSES	
PROGRAM	No.	%
3 Factors Aff. Eq. Pur.		
Hard Equipment	–	–
Manipulative Mat.	–	–
Age-Ability	5	14
Need	2	5
✓Safety	6	17
✓Sturdiness & Quality	9	25 ✓
Commercial Programs	–	–
✓Use	6	17 ✓
Number of Children	2	5
No Response	1	3
Cost	5	14
Trips		
Yes	11	73 ✓
No	–	–
No Response	4	27
Frequency		
1/wk.	1	6
1/mo.	–	–
2/mo.	2	13
Often	3	20 ✓
No Response	9	61
Types		
Educational	2	13
Fun	–	–
Appropriate	5	31
Zoo, Museum, Bakery...	5	31
No Response	4	25

TABLE II
CONTINUED

N=15

AREAS	RESPONSES	
STAFF	No.	%
Qual.: Center Dir.		
2yr. College in Ch. Dev.	4	20
2 yr. College in Ch. Dev & Bus. Ad.	1	5
B.S. or B.A. in Bus. Admin.	—	-
B.S. or B.A. in Ele. Ed.	—	-
B.S. or B.A. in Ch. Dev. or Ele. Ed.: ECE	9	45✓
*Other	5	25
No Response	1	5
Qual.: Ed. Dir.		
2 yr. College Ch. Dev.	1	6
B.S. or B.A. in Ch. Dev.	5	27
B.S. or B.A. in Ele. Ed.: ECE	7	39✓
**Other	4	22
No Response	1	6
Minimal Qual.: Teacher		
2 yr. College in Ch. Dev.	8	47✓
B.S. or B.A. in Ch. Dev.	3	18
B.S. or B.A. in Ele. Ed: ECE	3	18
***Other	2	11
No Response	1	6
Qual.: Teacher's Asst.	-	-
Educational		
High of Some College	9	24✓
None	1	3
No Response	4	11
Other	1	3
Personal		
Ability to work with staff, parents and children	2	5
Like Children	7	19✓
Willingness to Learn	2	5
Interest and Understanding of Children	7	19✓
No Response	4	11

* Selected a group and made additional statement.
** " " " " " " "
*** "

TABLE II
CONTINUED

N=15

AREAS	RESPONSES	
STAFF	No.	%
Other Staff Members		
Dietician	1	2.6
Speech Path.	2	5
Nurse	4	10
Social Worker	3	8
Child Psych.	1	2.6
Doctor	1	2.6
Play-Monitor	—	—
Parent Asst.	—	—
Cook	9	23 ✓
Maintenance	9	23 ✓
Neighborhood Vol.	—	—
Elderly Vol.	—	—
No Response	6	15
Secretary	3	8
*Staff Training Programs		
Workshops & In-Service Training in Ch. Dev., ECE, Bi-ling...	8	47 ✓
Course Work at College Level	2	11.7
Metings :Goals and Objectives	4	215
Observe Other Centers	2	16.7
Professional Library	1	5
No Response	—	

TABLE II
CONTINUED

N=15

AREAS	RESPONSES	
EMER.-HEALTH-FOOD	No.	%
Policies		
Insur. For Children & Staff	—	-
Annual Physical Re. (Staff)	3	11
Annual Physical re. (Stud.)	3	11
First Aide Knowledge (Staff)	—	-
Emergency Forms on File	11	38 ✓
Family & Child's Health His.	—	-
Yearly Eq. Check	—	-
Meet State & Local Fire & Health Codes	3	11
Drug Administration	3	11
For Ill Children	3	11
No Response	2	7
Procedures		
Fire Drill	4	20
Daily Health Check	3	15
Emergency Plan	11	55 ✓
First Aide Steps	—	-
Food Storage & Prep.	—	-
No Response	2	10
3 Annual Health Services Provided	2	10
None	2	10
Dental Exam	7	35 ✓
✓ Physical	4	20 ✓
✓ Vision Screening	3	15 ✓
✓ Hearing Exam	—	-
Psych. Testing	2	10
Diagnostic Ev. for Dev. Dis.	—	-
No Response		
Center Coop. Other Comm. Ag.		
Yes	12	100 ✓
No	—	-
Referral Center	10	43
#Location:Ser. Brought in	10	43 } Same
Other		
No Response	3	14

Tended to select both.

TABLE II
CONTINUED

N=15

AREAS	RESPONSES	
EMER.-HEALTH-FOOD	No.	%
Food		
Number Meals Served		
1-2 Snacks	4	27
2-2 Snacks	7	47✓
3-2 Snacks	1	6
No Response	3	20
Menu		
Snacks: Meet Nut. Re.	8	30
Lunch: Meet Nut. Re.	9	33
No Response	6	22
Breakfast	4	15
Payment		
Parent Fees	3	20
Federal-State Subsidy	2	13
Both	7	47✓
Other	1	6
No Response	2	14
Food Costs		
2.50/wk.	–	–
3.75/wk.	3	20
5.00/wk.	3	20
6.25/wk.	2	13
Other	2	13
No Response	5	34
***Factors Included in Figure**		
Nutritional Requirements	7	41✓
Serving Utensils	–	–
Cook's Salary	2	12
Kitchen Facilities	–	–
Rising Food Costs	3	18
No Response	5	29

* Listed more than one.

TABLE II
CONTINUED

N=15

AREAS	RESPONSES	
FINAL POINTS	No.	%
*Parental Role		
Interest & Knowledge of Goals	4	14
Cooperative	11	39✓
Supportive	5	19
Provide Input: Goals & Staff Selections	4	14
Establish Goals for Own Child	-	-
Establish the Center's Goals	2	7
No Response	2	7
Type of Evaluation		
Staff	3	20
Director's	1	7
Parental	–	-
Outside	–	-
✓All	6	40✓
Other	1	7
Combinations	4	26
No Response	—	-
Center Best Metting Parent's Needs (Par. Res. Only)		
Headstart	–	-
Private Large Day Care Corp.	–	-
Privately Owned & Operated	1	7
Nonprofit, Privately Owned	–	-
Nonprofit, Community Center	1	7
Parent-Coop.	–	-
Other	1	7
No Response	12	79
Center's Most Important Char.		
Staff Interest & Care	4	20
Staff Dedication	2	10
Staff's Qualifications	6	30✓
Teachers	–	-
Educational Pro.	1	5
Director	–	-
Food	–	-
Other	4	20
No Response	3	15
Parental Pre.: Infant - Toddler Care (Par. Res. Only)		
Profess. Trained Child Set.	2	13
Infant-Toddler Center	–	-
Home Care Center in Neigh.	2	13
Parent-Coop	1	7
Other	–	-
No Response	10	67

* Listed more than one role.

N=14

TABULATION OF TEACHERS' RESPONSES: THE CHARACTERISTICS OF A QUALITY CHILD CARE CENTER

TABLE III

AREAS	RESPONSES	
The Center	No.	%
Primary Function		
Child Dev.	14	100✓
School Re.	—	-
Custodial Care	—	-
Other	—	-
No Response	—	-
Order of Importance		
CD/SR/CC/O	6	43
SR/CD/CC/O	—	-
CC/CD/SR/O	—	-
No Response	—	-
Other CD/SE/SR/CC	8	57✓
2 Physical Plant		
Outdoor		
Size	3	8
Safety	2	6
✓Appearance	5	14
✓Type of Equipment	8	23
Fence	2	6
✓Types of Surfaces	8	23
No Response	7	20
2 Indoor		
Size	9	26✓2
Appearance	7	20✓[illegible]
Equipment	8	23✓1
Safety	—	-
Maintenance	1	3
Kitchen	—	-
Meets Fire and Health Codes	—	-
No Response	5	14
Other	5	14
Funding		
Parent Fees	1	7
Scholarships	—	-
Federal-State Tuition	2	14
Parental Payment (Sliding Scale)	6	43✓
Other	4	29
No Response	1	7
Who Determines Expenditures		
Board of Directors	1	7
Parent-Advisory Board	3	22
Financial Administrator	1	7
Educational Director	1	7
Other Combinations	7	50✓
No Response	1	7

Teachers

N=14

TABLE III
CONTINUED

AREAS	RESPONSES	
PROGRAM	No.	%
Specific Ed. Goals		
Yes	11	79 ✓
No	1	7
No Response	2	14
Primary Goal		
Soc.-Emo.	11	79 ✓
Phy.-Dev.	—	-
Lang.-Dev.	2	14
Read.-Readiness	—	-
Math	—	-
Other	—	-
No Response	1	7
Order of Importance		
Soc.-Emo./P.D./...	6	40 ✓
Lang. Dev./S-E/...	1	7
RR/LD/...	—	-
PD/S-E/...	—	-
Math/RR/...	—	-
No Response	1	7
Other	7	46
Grouping of Children		
Age	5	36 ✓
Sex	—	-
Ability	2	14
Cross-Aged	1	7
Other Combinations	6	43
No Response	—	
Adult/Child Ratio		
2½-3yr. 1 adult/5 Children	11.5	82 ✓
2½-3yr. 1 adult/8 Children	1.5	11
No Response	1	7
3-4 yr. 1 adult/5 Children	11	79 ✓
3-4 yr. 1 adult/10 Children	2	14
No Response	1	7
4-5 yr. 1 adult/7Children	11	79 ✓
4-5 yr. 1 adult/12 Children	3	21
No Response	—	-
2½-5 yr.1 adult/5 Children	10	72 ✓
2½-5 yr.1 adult/10 Children	1	7
No Response	3	21

N=14

TABLE III
CONTINUED

AREAS	RESPONSES	
PROGRAM	No.	%
Factors Aff. Eq. Pur.		
Hard Equipment	—	-
Manipulative Mat.	—	-
Age-Ability	5	17
Need	2	7 ✓
Safety	5	17
✓Sturdiness & Quality	7	23✓
Commercial Programs	—	-
Use	7	23✓
Number of Children	—	-
No Response	2	7
Cost	1	3
Other	1	3
Trips		
Yes	14	100✓
No	—	-
No Response	—	-
Frequency		
1/wk.	4	29
1/mo.	1	7
2/mo.	1	7
Often	5	36✓
No Response	3	21
☆Types		
Educational	3	19
Fun	—	-
Appropriate	—	-
Zoo, Museum, Bakery...	9	56✓
No Response	4	25

☆ Described trips with both references.

N=14

TABLE III
CONTINUED

AREAS	RESPONSES		
STAFF	No.	%	
Qual.: Center Dir.			
2yr. College in Ch. Dev.	5	31	
2 yr. College in Ch. Dev & Bus. Ad.	3	19	
B.S. or B.A. in Bus. Admin.	—	-	
B.S. or B.A. in Ele. Ed.	1	6	
B.S. or B.A. in Ch. Dev. or Ele. Ed.: ECE	6	38 ✓	
Other	—	-	
*No Response	1	6	
Qual.: Ed. Dir.			
2 yr. College Ch. Dev.	7	44 ✓	
B.S. or B.A. in Ch. Dev.	3	19	
B.S. or B.A. in Ele. Ed.: ECE	4	25	
**Other	2	12	
No Response	—	-	
Minimal Qual.: Teacher			
2 yr. College in Ch. Dev.	10	63 ✓	
B.S. or B.A. in Ch. Dev.	1	6	
B.S. or B.A. in Ele. Ed: ECE	3	19	
Other	2	12	
***No Response	—	-	
Qual.: Teacher's Asst.			
Educational			
High or Some College	10	67 ✓	
None		-	
No Response	3	20	
Experience	2	13	
Personal			
Ability to work with staff, parents and children	—	-	
Like Children	5	31	Same
Willingness to Learn	1	7	
Interest and Understanding of Children	5	31	
No Response	5	31	

* Some selected 2 groups and rated them equally.
** Added experience and interest in children.
*** Added experience and interest in children.

N = 14

TABLE III
CONTINUED

AREAS	RESPONSES	
STAFF	No.	%
Other Staff Members		
Dietician	—	—
Speech Path.	—	—
Nurse	1	2
Social Worker	4	10 ✓
Child Psych.	2	5
Doctor	—	—
Play-Monitor	—	—
Parent Asst.	2	5
Cook	7	17 } same
Maintenance	7	17 } same
Neighborhood Vol.	3	8
Elderly Vol.	—	—
No Response	5	13
Secretary	4	10
Teachers [illegible])	5	13
Staff Training Programs		
Workshops & In-Service Training in Ch. Dev., ECE, Bi-ling...	11	60 ✓
Course Work at College Level	1	5
Metings :Goals and Objectives	—	—
Observe Other Centers	1	5
Professional Library	1	5
No Response	3	16
First Aid Training	1	5

TABLE III
CONTINUED

N=14

AREAS	RESPONSES	
EMER.-HEALTH-FOOD	No.	%
Policies		
Insur. For Children & Staff	—	—
Annual Physical Re. (Staff)	1	6
Annual Physical re. (Stud.)	1	6
First Aide Knowledge (Staff)	1	6
Emergency Forms on File	7	38 ✓
Family & Child's Health His.	—	—
Yearly Eq. Check	—	—
Meet State & Local Fire & Health Codes	1	6
Drug Administration	1	6
For Ill Children	1	6
No Response	5	26
Procedures		
Fire Drill	4	27
Daily Health Check	1	7
Emergency Plan	5	33 ✓
First Aide Steps	—	—
Food Storage & Prep.	—	—
No Response	5	33
3 **Annual Health Services Provided**		
None	2	8
✓Dental Exam	4	16- same
✓Physical	4	16-
✓Vision Screening	5	20-
✓Hearing Exam	4	16-
Psych. Testing	1	4
Diagnostic Ev. for Dev. Dis.	1	4
No Response	4	16
Center Coop. Other Comm. Ag.		
Yes	12	100 ✓
No	—	—
*Referral Center	8	36.5
Location: Ser. Brought in	10	45.5 ✓
Other	2	9
No Response	2	9

* Tended to select both

N=14

TABLE III
CONTINUED

AREAS	RESPONSES	
ENVIR.-HEALTH-FOOD	No.	%
Food		
Number Meals Served		
1-2 Snacks	3	21
2-2 Snacks	7	50 ✓
3-2 Snacks	–	–
No Response	3	21
Other	1	8
Menu		
Snacks: Meet Nut. Re.	8	28
Lunch: Meet Nut. Re.	8	28
No Response	6	20
Breakfast	7	24
Payment		
Parent Fees	1	7
Federal-State Subsidy	6	43 ✓
Both	4	29
Other	1	7
No Response	2	15
Food Costs		
2.50/wk.	–	–
3.75/wk.	1	7
5.00/wk.	3	21
6.25/wk.	5	36 ✓
Other	1	7
No Response	4	29
Factors Included in Figure		
Nutritional Requirements	4	29 ✓
Serving Utensils	–	–
Cook's Salary	–	–
Kitchen Facilities	–	–
Rising Food Costs	2	14
No Response	8	57

N=14

TABLE III
CONTINUED

AREAS	RESPONSES	
FINAL POINTS	No.	%
Parental Role		
Interest & Knowledge of Goals	5	22
✓Cooperative	10	44✓
Supportive	4	17
Provide Input: Goals & Staff Selections	1	4
Establish Goals for Own Child	—	-
Establish the Center's Goals	—	-
No Response	3	13
Type of Evaluation		
Staff	—	—
Director's	2	14
Parental	—	—
Outside	1	7
All	3	22
Other	—	—
Combinations	6	43✓
No Response	2	14
Center Best Meeting Parent's Needs		
Headstart	—	-
Private Large Day Care Corp.	—	-
Privately Owned & Operated	1	7
Nonprofit, Privately Owned	1	7
Nonprofit, Community Center	2	14✓
Parent-Coop.	1	7
Other	1	7
No Response	8	58
Center's Most Important Char.		
Staff Interest & Care	5	37✓
Staff Dedication	5	21
Staff's Qualifications	3	21
Teachers	—	—
Educational Pro.	—	—
Director	—	—
Food	—	—
Other	—	—
No Response	3	21
Parental Pre. : Infant + Toddler Care		
Profess. Trained Child Set.	—	—
Infant-Toddler Center	1	7
Home Care Center in Neigh.	2	14✓
Parent-Coop		
Other	—	—
No Response	11	79

TABULATION OF [illegible] RESPONSES; THE CHARACTERISTICS OF A QUALITY CHILD CARE CENTER

N = 20

TABLE IV

AREAS	RESPONSES	
The Center	No.	%
Primary Function		
Child Dev.	13	65 ✓
School Re.	5	25
Custodial Care	–	–
Other	2	10
No Response	—	–
Order of Importance		
CD/SR/CC/O	8	40 ✓
SR/CD/CC/O	3	15
CC/CD/SR/O	–	–
No Response	—	—
[illegible]	5	25
[illegible]	2	10
Physical Plant	2	10
Outdoor		
Size	1	3
Safety	3	8
Appearance	8	23 ✓
Type of Equipment	16	46 ✓
Fence	1	3
Types of Surfaces	0	–
No Response	6	17
Indoor		
Size	12	31 ✓
Appearance	11	27 ✓
Equipment	3	8
Safety	1	2
Maintenance	4	10
Kitchen		
Meets Fire and Health Codes	1	2
No Response	5	13
Other	2	5
Funding		
Parent Fees	—	–
Scholarships	1	5
Federal-State Tuition	1	5
Parental Payment (Sliding Scale)	15	75 ✓
Other	3	15
No Response	—	–
Who Determines Expenditures		
Board of Directors	1	5
Parent-Advisory Board	11	55 ✓
Financial Administrator	1	5
Educational Director	1	5
Other	5	25
No Response	1	5

LOWER ECONOMIC LEVEL - FED FUNDED CENTR 98% SINGLE (FEMALE) HEADED FAMILIES
MEXICAN-AMERICAN (SOME WHITE)

TABLE IV
CONTINUED

N=20

AREAS	RESPONSES	
PROGRAM	No.	%
Specific Ed. Goals		
Yes	17	85✓
No	–	–
No Response	3	15
Primary Goal		
Soc.-Emo.	12	60✓
Phy.-Dev.	–	–
Lang.-Dev.	5	25
Read.-Readiness	3	15
Math	–	–
Other	–	–
No Response	–	–
Order of Importance		
Soc.-Emo./P.D./...	6	15✓
Lang. Dev./S-E/...	1	2
RR/LD/...	1	2
PD/S-E/...	–	–
Math/RR/...	–	–
No Response	–	–
RR/M	2	5
SE/LD	6	15✓
4/other	4	10
Grouping of Children		
Age	8.5	22✓
Sex	–	–
Ability	5	13
Cross-Aged	1.5	3
Other	5	13
No Response	–	–
Adult/Child Ratio		
2½-3yr. 1 adult/5 Children	14	70✓
2½-3yr. 1 adult/8 Children	2	10
No Response	4	20
3-4 yr. 1 adult/5 Children	10	50✓
3-4 yr. 1 adult/10 Children	5	25
No Response	5	25
4-5 yr. 1 adult/7Children	8	40
4-5 yr. 1 adult/12 Children	8	40 Same
No Response	4	20
2½-5 yr.1 adult/5 Children	15	75✓
2½-5 yr.1 adult/10 Children	2	10
No Response	3	15

TABLE IV
CONTINUED

N=20

AREAS	RESPONSES	
PROGRAM	No.	%
Factors Aff. Eq. Pur.		
Hard Equipment	—	-
Manipulative Mat.	—	-
Age-Ability	6	17
Need	1	3
✓Safety	9	26
✓Sturdiness & Quality	7	21
Commercial Programs	—	-
Use	7	21
✓Number of Children	—	-
No Response	2	6
Cost	1	3
Other	1	3
Trips		
✓Yes	20	100
No	—	-
No Response	—	-
Frequency		
1/wk.	2	10
1/mo.	2	10
✓2/mo.	5	25
Often	3	15
No Response	7	35
Other	1	5
Types		
Educational	9	39
Fun	—	-
Appropriate	—	-
✓Zoo, Museum, Bakery...	13	57
No Response	1	4

N=20

TABLE IV
CONTINUED

AREAS	RESPONSES	
STAFF	No.	%
Qual.: Center Dir.		
2yr. College in Ch. Dev.	4	18
2 yr. College in Ch. Dev & Bus. Ad.	2	9
B.S. or B.A. in Bus. Admin.	—	-
B.S. or B.A. in Ele. Ed.	1	5
B.S. or B.A. in Ch. Dev. or Ele. Ed.: ECE	8	36 ✓
*Other	4	18
No Response	3	14
Qual.: Ed. Dir.		
2 yr. College Ch. Dev.	4	20
B.S. or B.A. in Ch. Dev.	2	10
B.S. or B.A. in Ele. Ed.: ECE	10	50 ✓
Other	3	15
No Response	1	5
Minimal Qual.: Teacher		
2 yr. College in Ch. Dev.	10	45 ✓
B.S. or B.A. in Ch. Dev.	2	9
B.S. or B.A. in Ele. Ed: ECE	7	32
**Other	3	14
No Response	—	—
Qual.: Teacher's Asst.		
Educational		
High or Some College	14	64 ✓
None	—	-
No Response	6	27
Experience	2	9
Personal		
Ability to work with staff, parents and children	—	—
Like Children	7	33 ✓
Willingness to Learn	1	5
Interest and Understanding of Children	8	38
No Response	5	24

* Added experience + ability to work with Kids
** Added high school, on-job training and first aid.

TABLE IV CONTINUED

N=20

AREAS	RESPONSES	
STAFF	No.	%
Other Staff Members		
Dietician	—	—
Speech Path.	—	—
Nurse	2	6
Social Worker	1	3
Child Psych.	1	3
Doctor	—	—
Play-Monitor	—	—
Parent Asst.	2	6
Cook	6	18
Maintenance	6	18
Neighborhood Vol.	2	6
Elderly Vol.	1	3
No Response	13	39
Staff Training Programs		
Workshops & In-Service Training in Ch. Dev., ECE, Bi-ling...	11	39 ✓
Course Work at College Level	5	18
Metings :Goals and Objectives	4	14
Observe Other Centers	—	—
Professional Library	5	18
No Response	—	—
Other	3	11

TABLE IV
CONTINUED

N=20

AREAS	RESPONSES	
EMER.-HEALTH-FOOD	No.	%
Policies		
Insur. For Children & Staff	—	-
Annual Physical Re. (Staff)	—	-
Annual Physical re. (Stud.)	—	-
First Aide Knowledge (Staff)	2	10✓
Emergency Forms on File	5	25✓
Family & Child's Health His.	—	-
Yearly Eq. Check	—	-
Meet State & Local Fire & Health Codes	—	-
Drug Administration	—	-
For Ill Children	—	-
No Response	13	65
Procedures		
Fire Drill	—	-
Daily Health Check	—	-
Emergency Plan	11	55✓
First Aide Steps	1	5
Food Storage & Prep.	—	-
No Response	8	40
*Annual Health Services Provided		
None	—	-
Dental Exam	14	33✓
Physical	11	25✓
Vision Screening	6	14
Hearing Exam	6	14
Psych. Testing	1	2
Diagnostic Ev. for Dev. Dis.	2	4
No Response	2	4
Other	2	4
Center Coop. Other Comm. Ag.		
Yes	20	100✓
No	—	-
Referral Center	6	23
*Location: Ser. Brought in	18	69✓
Other	2	8
No Response	—	-

* 4 Parents selected both.

TABLE IV
CONTINUED

N = 20

AREAS	RESPONSES	
EMER.-HEALTH-FOOD	No.	%
Food		
Number Meals Served		
1-2 Snacks	1	5
2-2 Snacks	19	95 ✓
3-2 Snacks	—	-
No Response	—	-
Menu		
Snacks: Meet Nut. Re.	7	21
Lunch: Meet Nut. Re.	13	39
No Response	7	21
Breakfast	7	21
Payment		
Parent Fees	1	5
Federal-State Subsidy	12	60 ✓
Both	7	35
Other	—	-
No Response	—	-
Food Costs		
2.50/wk.	2	10
3.75/wk.	4	20
5.00/wk.	7	35 ✓
6.25/wk.	3	15
Other	4	20
No Response	—	-
Factors Included in Figure		
Nutritional Requirements	6	30 ✓
Serving Utensils	—	-
Cook's Salary	—	-
Kitchen Facilities	—	-
Rising Food Costs	3	15
No Response	9	45
Other	2	10

AREAS	RESPONSES	
FINAL POINTS	No.	%
Parental Role		
Interest & Knowledge of Goals	5	21
Cooperative	9	37✓
Supportive	1	4
Provide Input: Goals & Staff Selections	1	4
Establish Goals for Own Child	—	—
Establish the Center's Goals	—	—
No Response	8	34
Type of Evaluation		
Staff	3	15
Director's	3	15
Parental	1	5
Outside	2	10
All	2	10
Other	6	30✓
*Combinations	4	20
No Response	1	5
Center Best Metting Parent's Needs		
Headstart	—	—
Private Large Day Care Corp.	—	—
Privately Owned & Operated	—	—
Nonprofit, Privately Owned	1	5
Nonprofit, Community Center	12	60✓
Parent-Coop.	3	15
Other (24-Hour Center)	1	5
No Response	3	15
Center's Most Inportant Char.		
Staff Interest & Care	6	30✓
Staff Dedication	1	5
Staff's Qualifications	—	—
Teachers	2	10
Educational Pro.	2	10
Director	—	—
Food	—	—
Other	1	5
No Response	6	30
Child Response	2	10
Parental Pre. : Infant - Toddler Care		
Profess. Trained Child Set.	1	5
Infant-Toddler Center	4	20
Home Care Center in Neigh.	6	30✓
Parent-Coop	4	20
Other	1	5
No Response	4	20

* St-Par-3 / Par-Dir-2

THE CHARACTERISTICS OF A QUALITY CHILD CARE CENTER

TABLE V

N=12

AREAS	RESPONSES	
The Center	No.	%
Primary Function		
Child Dev.	8	67 ✓
School Re.	2	17
Custodial Care	2	17
Other	—	-
No Response	—	-
Order of Importance		
CD/SR/CC/O	2	17
SR/CD/CC/O	2	17
CC/CD/SR/O	2	17
No Response	—	-
CD only	6	47 ✓
Physical Plant		
Outdoor		
Size	1	5
Safety	3	16
✓ Appearance 29	5	26 ✓
✓ Type of Equipment 39	6	32 ✓
Fence	—	-
Types of Surfaces	—	-
No Response	4	21
Indoor		
Size 2	7	32 ✓
Appearance 71	8	36 ✓
Equipment	—	-
Safety	1	5
Maintenance	2	9
Kitchen	—	-
Meets Fire and Health Codes	1	5
No Response	3	13
Funding		
Parent Fees	1	8
Scholarships	—	-
Federal-State Tuition	2	17
Parental Payment (Sliding Scale) 71	8	67 ✓
Other:	1	8
No Response	—	-
Who Determines Expenditures		
Board of Directors	1	8
Parent-Advisory Board 40	3	25
Financial Administrator	3	25
Educational Director	2	17
Other (Par. - Board)	2	17
No Response	1	8

LOWER ECO. LEVEL - FED. FUNDED CENTER
BLACK

TABLE X
CONTINUED

N=12

AREAS	RESPONSES	
PROGRAM	No.	%
Specific Ed. Goals 63		
Yes	10	42✓
No	1	4
No Response	1	4
Primary Goal		
Soc.-Emo. 45	7	30✓
Phy.-Dev.	—	—
Lang.-Dev.	1	4
Read.-Readiness 12	2	8
Math	—	—
Other (All Equal)	1	4
No Response	1	4
Order of Importance		
Soc.-Emo./P.D./...	5	21✓
Lang. Dev./S-E/...	1	4
RR/LD/...	—	—
PD/S-E/...	—	—
Math/RR/...	—	—
No Response	1	4
RR/S-E	2	8
SE/LD/RR	2	8
Other	1	4
Grouping of Children		
Age 17	3	13
Sex	—	—
Ability	4	17
Cross-Aged	0	—
#Other Combinations 17	5	21✓
No Response	—	—
Adult/Child Ratio		
2½-3yr. 1 adult/5 Children 64	7	58✓
2½-3yr. 1 adult/8 Children	1	8
No Response	4	24
3-4 yr. 1 adult/5 Children 58	8	67✓
3-4 yr. 1 adult/10 Children	1	8
No Response	3	25
4-5 yr. 1 adult/7 Children 41	5	42✓
4-5 yr. 1 adult/12 Children	3	25
No Response	4	33
2½-5 yr. 1 adult/5 Children 71	8	67✓
2½-5 yr. 1 adult/10 Children	1	8
No Response	3	25

Age-Ability (4)   RR-ER-1

N=12

TABLE V
CONTINUED

AREAS	RESPONSES	
PROGRAM	No.	%
Factors Aff. Eq. Pur.		
Hard Equipment	—	–
Manipulative Mat.	—	–
✓Age-Ability 20	5	24
Need	—	–
✓Safety 25	5	24
Sturdiness & Quality 15	2	10
Commercial Programs	—	–
✓Use [illegible]	7	32
Number of Children	—	–
No Response	2	10
Trips		
Yes [illegible]	12	100✓
No	—	–
No Response	—	–
Frequency		
1/wk.	1	8
1/mo. 17	3	25✓
2/mo. 21	2	17
Often	2	17
No Response	4	33
Types		
Educational 44	6	50
Fun	—	–
Appropriate	—	–
Zoo, Museum, Bakery... 53	6	50
No Response	—	-

TABLE I
CONTINUED

N=12

AREAS -	RESPONSES	
STAFF	No.	%
Qual.: Center Dir.		
2yr. College in Ch. Dev.	3	25
2 yr. College in Ch. Dev & Bus. Ad.	2	17
B.S. or B.A. in Bus. Admin.	—	-
B.S. or B.A. in Ele. Ed.	1	8
B.S. or B.A. in Ch. Dev. 43 or Ele. Ed.: ECE	6	50 ✓
Other	—	-
No Response	—	-
Qual.: Ed. Dir.		
2 yr. College Ch. Dev.	—	—
B.S. or B.A. in Ch. Dev.	3	25
B.S. or B.A. in Ele. Ed.: ECE 54	7	58 ✓
Other	—	-
No Response	2	17
Minimal Qual.: Teacher		
2 yr. College in Ch. Dev. 47	7	50 ✓
B.S. or B.A. in Ch. Dev.	—	-
B.S. or B.A. in Ele. Ed: ECE 50	4	29
#Other (Experience)	1	7
No Response	2	14
Qual.: Teacher's Asst.		
Educational		
High or Some College 69	9	75 ✓
None	—	-
No Response	3	25
Personal		
Ability to work with staff, parents and children	2	17
Like Children 5	-	-
Willingness to Learn	—	-
Interest and Understanding of Children 46	2	17
No Response	7	58
Health	1	8

Some parents selected both 2 yr. CD and Ele. ECE

TABLE V
CONTINUED

N=12

AREAS	RESPONSES	
STAFF	No.	%
Other Staff Members		
Dietician	—	—
Speech Path.	—	—
Nurse	2	15 ✓
Social Worker	—	—
Child Psych.	—	—
Doctor	—	—
Play-Monitor	—	—
Parent Asst.	1	7
Cook	1	7
Maintenance	1	7
Neighborhood Vol.	—	—
Elderly Vol.	—	—
No Response	9	64
Staff Training Programs		
Workshops & In-Service Training in Ch. Dev., ECE, Bi-ling...	3	20
Course Work at College Level	7	47 ✓
Metings :Goals and Objectives	—	—
Observe Other Centers	1	7
Professional Library	—	—
No Response	4	26

TABLE V
CONTINUED

N=12

AREAS	RESPONSES	
EMER.-HEALTH-FOOD	No.	%
Policies		
Insur. For Children & Staff	—	—
Annual Physical Re. (Staff)	—	—
Annual Physical re. (Stud.)	—	—
First Aide Knowledge (Staff)	1	8
Emergency Forms on File	8	67✓
Family & Child's Health His.	—	—
Yearly Eq. Check	—	—
Meet State & Local Fire & Health Codes	—	—
Drug Administration	—	—
For Ill Children	1	8
No Response	2	17
Procedures		
Fire Drill	—	—
Daily Health Check	—	—
Emergency Plan	8	67✓
First Aide Steps	1	8
Food Storage & Prep.	—	—
No Response	3	25
†Annual Health Services Provided		
None	—	—
Dental Exam	3	23
Physical	3	23
Vision Screening	3	23
Hearing Exam	1	8
Psych. Testing	—	—
Diagnostic Ev. for Dev. Dis.	—	—
No Response	3	23
Center Coop. Other Comm. Ag.		
Yes	12	100✓
No	—	—
Referral Center	5	31
†Location:Ser. Brought in	11	69✓
Other	—	—
No Response	—	—

† Some parents selected both

TABLE V
CONTINUED

N=12

AREAS -	RESPONSES	
EMER.-HEALTH-FOOD	No.	%
Food		
Number Meals Served		
1-2 Snacks	1	8
2-2 Snacks 45	9	76✓
3-2 Snacks	–	–
No Response	1	8
1-1 Snack	1	8
Menu		
Snacks: Meet Nut. Re.	6	26
Lunch: Meet Nut. Re.	6	26
No Response	6	26
Breakfast	5	22
Payment		
Parent Fees	1	8
Federal-State Subsidy 72	10	84✓
Both	1	8
Other	–	–
No Response	–	–
Food Costs		
2.50/wk.	1	8
3.75/wk.	2	17
5.00/wk. 33	3	25✓
6.25/wk.	2	17
Other [1 Met - 1 Less - 0 [illegible]] 32	3	25
No Response	1	8
Factors Included in Figure		
Nutritional Requirements 33	2	17
Serving Utensils	–	–
Cook's Salary	–	–
Kitchen Facilities	–	–
Rising Food Costs	3	25✓
No Response	7	58

N-12 TABLE I

AREAS	RESPONSES	
FINAL POINTS	No.	%
Parental Role		
Interest & Knowledge of Goals	2	14
Cooperative	5	36✓
Supportive	–	–
Provide Input: Goals & Staff Selections	1	7
Establish Goals for Own Child	1	7
Establish the Center's Goals	2	14
No Response	3	22
Type of Evaluation		
Staff 15	2	15
Director's	1	8
Parental	2	15
Outside	2	15
All	–	–
Other	1	8
#Combinations 25	4	31✓
No Response	1	8
Center Best Meeting Parent's Needs		
Headstart	1	8
Private Large Day Care Corp.	–	–
Privately Owned & Operated	–	–
Nonprofit, Privately Owned	–	–
Nonprofit, Community Center	8	67✓
Parent-Coop.	2	17
Other	–	–
No Response	1	8
Center's Most Important Char.		
Staff Interest & Care	4	31✓
Staff Dedication	2	15
Staff's Qualifications	1	8
Teachers	–	–
Educational Pro.	1	8
Director	–	–
Food	–	–
##Other	–	–
No Response	5	38
Parental Pre.: Infant - Toddler Care		
Profess. Trained Child Set.	3	25
Infant-Toddler Center	1	8
Home Care Center in Neigh.	5	42✓
Parent-Coop	–	–
Other	–	–
No Response	3	25

# Par.-St.(2)   St.-Dir-E(1)   Par-E(1)

## Nr. Listed more than 1.

TABULATION OF PARENTAL RESPONSES:
THE CHARACTERISTICS OF A QUALITY
CHILD CARE CENTER

N=32

TABLE VI

AREAS	RESPONSES	
The Center	No.	%
Primary Function		
Child Dev.	27	84✓
School Re.	–	–
Custodial Care	1	3
Other	4	13
No Response	–	–
Order of Importance		
CD/SR/CC/O	16	50✓
SR/CD/CC/O	–	–
CC/~~CD~~ SR/SR/O	1	3
No Response	–	–
O/CD	4	12
CD/SR	8	26
CD/CC	3	9
2 Physical Plant		
Outdoor		
Size	10	16
Safety 15	6	9
Appearance 5	5	8
✓Type of Equipment 34	25	39
Fence 6	2	3
Types of Surfaces 12	10	16
No Response	6	9
2 Indoor		
✓Size	19	29✓
✓Appearance 36	16	25✓
Equipment 16	15	23
Safety	2	3
Maintenance	3	5
Kitchen	–	–
Meets Fire and Health Codes	2	3
No Response	5	7
Other	3	5
Funding		
Parent Fees 20	5	17
Scholarships	–	–
Federal-State Tuition 7	3	9
Parental Payment (Sliding Scale)	12	37✓
*Other	12	37
No Response	–	–
Who Determines Expenditures		
Board of Directors 7	3	9
Parent-Advisory Board	5	17
Financial Administrator 6	1	3
Educational Director 15	2	6
**Other	19	59
No Response	2	6

* Combinations Par.-Sch. 5; Remainder split - no cluster
** Combinations Par.-Ed.Dir. 6; Par.-B.Dir. 4; Par.-Tea.-Ed.Dir. 3; Par.-Tea. 2; P-T-Ed 2; Ad-2.

White, Middle Class - Parent Cooperative - Half-Day Preschool

TABLE VI
CONTINUED

N=32

AREAS	RESPONSES	
PROGRAM	No.	%
Specific Ed. Goals		
Yes	27	84 ✓
No	5	16
No Response	—	—
Primary Goal		
Soc.-Emo. 55	26	81 ✓
Phy.-Dev.	—	—
Lang.-Dev.	—	—
Read.-Readiness	—	—
Math	—	—
*Other	4	13
No Response	2	6
Order of Importance		
Soc.-Emo./P.D./... 36	14	44 ✓
Lang. Dev./S-E/...	—	—
RR/LD/...	—	—
PD/S-E/...	—	—
Math/RR/...	—	—
No Response	2	6
SE/LD	5	16
SE/RR	7	21
Other	4	13
Grouping of Children		
Age	10	31
Sex	—	—
Ability	2	6
Cross-Aged 26	12	38
**Other	8	25
No Response	—	
Adult/Child Ratio		
2½-3yr. 1 adult/5 Children 77	26	81 ✓
2½-3yr. 1 adult/8 Children	5	16
No Response	1	3
3-4 yr. 1 adult/5 Children 55	18	56 ✓
3-4 yr. 1 adult/10 Children	12	38
No Response	2	6
4-5 yr. 1 adult/7Children 47	16.5	52 ✓
4-5 yr. 1 adult/12 Children	12.5	39
No Response	3	9
2½-5 yr.1 adult/5 Children	25	78 ✓
2½-5 yr.1 adult/10 Children	3	9
No Response	4	13

* 2 All equal; 2 Creativity/RR/S-E
** Cross-Aged 7; Age-Sex-Ability 1

TABLE VI
CONTINUED

N = 32

AREAS	RESPONSES	
PROGRAM	No.	%
3 Factors Aff. Eq. Pur.		
Hard Equipment	1	1
Manipulative Mat.	3	4
Age-Ability	11	15
Need	4	5
✓Safety	12	16
✓Sturdiness & Quality	20	27
Commercial Programs	—	—
✓Use	21	28
Number of Children	1	1
No Response	2	3
Trips		
Yes	31	97 ✓
No	—	—
No Response	1	3
Frequency		
1/wk.	—	—
1/mo.	11	34 ✓
2/mo.	5	16
Often	5	16
No Response	9	28
Other	2	6
Types		
Educational	5	14
Fun	3	9
Appropriate	3	9
*Zoo, Museum, Bakery...	20	56 ✓
No Response	4	12

* Parents described trips according to more than 1 category.

TABLE VI
CONTINUED

N=32

AREAS	RESPONSES	
STAFF	No.	%
Qual.: Center Dir.		
2yr. College in Ch. Dev.	5	11
2 yr. College in Ch. Dev & Bus. Ad.	4	9
B.S. or B.A. in Bus. Admin.	5	11
B.S. or B.A. in Ele. Ed.	—	–
B.S. or B.A. in Ch. Dev. or Ele. Ed.: ECE 43	17	39 ✓
*Other	11	25
No Response	2	5
Qual.: Ed. Dir.		
2 yr. College Ch. Dev.	2	5
B.S. or B.A. in Ch. Dev.	14	34
**B.S. or B.A. in Ele. Ed.: ECE 56	16	39 ✓
***Other	7	17
No Response	2	5
Minimal Qual.: Teacher		
2 yr. College in Ch. Dev. 32	10	25
B.S. or B.A. in Ch. Dev.	12	30
****B.S. or B.A. in Ele. Ed: ECE [illegible]	16	40 ✓
Other	2	
No Response	—	5
Qual.: Teacher's Asst.		
Educational		
High of Some College 61	22	65 ✓
None	2	5
No Response	5	15
Other	5	15
Personal		
Ability to work with staff, parents and children 37	18	41
Like Children 5	16	36 ✓
Willingness to Learn	2	5
Interest and Understanding of Children 17	5	11
[illegible]	1	2
No Response	2	5

* Added Masters Degree in C.D. or ECE and Experience.

** Selected both C.D + ECE equally.

*** Added Grad. work in C.D. or ECE and Experience.

**** Selected both C.D. + ECE equally.

TABLE VI
CONTINUED

N=32

AREAS	RESPONSES	
STAFF	No.	%
Other Staff Members		
Dietician	1	2
Speech Path.	–	–
Nurse 1	7	10
Social Worker 4	5	8
Child Psych. 16	12	18 ✓
Doctor	4	6
Play-Monitor	1	2
Parent Asst.	7	10
Cook 10	3	5
Maintenance 11	5	7
Neighborhood Vol.	6	9
Elderly Vol.	3	5
No Response	5	7
Secretary	4	6
* Ed. Consultant	3	5
Staff Training Programs		
Workshops & In-Service Training in Ch. Dev., ECE, Bi-ling...	26	57 ✓
Course Work at College Level	3	6
Metings :Goals and Objectives	10	22
Observe Other Centers	5	11
Professional Library	–	–
No Response	2	4

* Diagnostic Tea. 2/ BookKeeper 1/ Dental Hyg. 1/ Counselor 1/ Comm. Health Dept. 1/ Nurse 1

TABLE VI
CONTINUED

N = 32

AREAS.	RESPONSES	
EMER.-HEALTH-FOOD	No.	%
Policies		
Insur. For Children & Staff	—	—
Annual Physical Re. (Staff)	1	3
Annual Physical re. (Stud.)	1	3
First Aide Knowledge (Staff) 7	4	10
Emergency Forms on File 59	20	51 ✓
Family & Child's Health His.	—	—
Yearly Eq. Check	—	—
Meet State & Local Fire & Health Codes	—	—
Drug Administration	1	3
For Ill Children	—	—
No Response	9	23
Nurse on Staff	3	7
Procedures		
Fire Drill 10	3	9
Daily Health Check	—	—
Emergency Plan	19	58 ✓
First Aide Steps	1	3
Food Storage & Prep.	—	—
No Response	9	27
Treating Injured Child	1	3
* Annual Health Services Provided		
None	2	3
Dental Exam 9	4	6
Physical	2	3
Vision Screening 27	21	32 ✓
Hearing Exam 29	22	33 ✓
Psych. Testing	—	—
Diagnostic Ev. for Dev. Dis.	4	6
No Response	5	8
Vaccinations	4	6
Other	4	6
Center Coop. Other Comm. Ag.		
Yes 62	24	89 ✓
No	3	11
Referral Center 36	14	35
*Location: Ser. Brought in 57	18	45 ✓
Other	3	10
No Response	5	20.

* Some selected both

TABLE VI
CONTINUED

N=32

AREAS	RESPONSES	
EMER.-HEALTH-FOOD	No.	%
Food		
Number Meals Served		
1-2 Snacks [illegible] X	10	31
2-2 Snacks	11	34 ✓
3-2 Snacks	2	6
No Response	4	13
Other (Snacks-3; Depends 2)	5	16
Menu		
Snacks: Meet Nut. Re.	21	34
Lunch: Meet Nut. Re.	21	34
No Response	9	15
Breakfast	10	17
Payment		
Parent Fees	5	16
Federal-State Subsidy	1	3
Both [illegible]	22	69 ✓
Other	1	3
No Response	3	9
Food Costs		
2.50/wk.	1	3
3.75/wk. [illegible]	3	9
5.00/wk. 14	5	16
6.25/wk. 16	7	22 ✓
Other	2	6
No Response	14	44
Factors Included in Figure		
Nutritional Requirements 37	10	29 ✓
Serving Utensils	—	-
Cook's Salary	1	3
Kitchen Facilities	—	—
Rising Food Costs	4	11
No Response	16	46
Other	4	11

TABLE VI
CONTINUED

N=32

AREAS	RESPONSES	
FINAL POINTS	No.	%
Parental Role		
Interest & Knowledge of Goals 27	11	21
Cooperative 22	11	21
Supportive 27	16	30✓
Provide Input: Goals & Staff Selections	10	19
Establish Goals for Own Child	—	-
Establish the Center's Goals	—	-
No Response	5	9
Type of Evaluation		
Staff	—	-
Director's	—	-
Parental	—	-
Outside	5	16
All 22	13	41✓
Other	—	-
*Combinations 22	13	41
No Response	1	2
Center Best Meeting Parent's Needs		
Headstart	—	-
Private Large Day Care Corp.	—	-
Privately Owned & Operated	5	12
Nonprofit, Privately Owned	2	5
Nonprofit, Community Center	4	10
Parent-Coop.	22	55✓
**Other	4	10
No Response	3	8
Center's Most Important Char.		
Staff Interest & Care 13	8	22✓
Staff Dedication	2	6
Staff's Qualifications 11	3	8
Teachers	4	11
Educational Pro.	—	-
Director	—	-
Food	—	-
***Other 45	15	42
No Response	4	11
Parental Pre.: Infant - Toddler Care		
Profess. Trained Child Set.	4	10
Infant-Toddler Center	1	3
Home Care Center in Neigh.	20	51✓
Parent-Coop	9	23
****Other	1	3
No Response	4	10

* St-Dir. 3/ St.-Par. 5/ S-D-P 4/ D-P 1

** Selected more than one.

**** Selected more than one.

*** Atmosphere 3/ Parental Need 2/ Equip. 3/ CAB 3/ Cost of Program 1/ Staff/Child Ratio 2

TOTAL

TABULATION OF PARENTAL RESPONSES: THE CHARACTERISTICS OF A QUALITY CHILD CARE CENTER

TABLE VII

N=85

AREAS	RESPONSES	
The Center	No.	%
Primary Function		
Child Dev.	64	73✓
School Re.	8	12
Custodial Care	3	5
Other	6	10
No Response	—	—
Order of Importance		
CD/SR/CC/O	40	47✓
SR/CD/CC/O	5	6
CC/CD/SR/O	3	3
No Response	5	6
Other	32	38
*Physical Plant		
Outdoor		
Size	14	9
Safety	17	11
✓Appearance	21	14
✓Type of Equipment	57	38✓
Fence	5	3
Types of Surfaces	13	4
No Response	25	16
Indoor		
✓Size	49	30
✓Appearance	45	28
Equipment	22	14
Safety	6	4
Maintenance	12	7
Kitchen	—	
Meets Fire and Health Codes	4	2
No Response	19	12
Other	5	3
Funding		
Parent Fees	11	13
Scholarships	1	1
Federal-State Tuition	8	10
✓Parental Payment(Sliding Scale)	42	51
Other	20	24
No Response	1	1
Who Determines Expenditures		
Board of Directors	6	7
Parent-Advisory Board	25	25
Financial Administrator	7	8
Educational Director	20	20
Other	33	35✓
No Response	5	5

TABLE III
CONTINUED

N=85

AREAS	RESPONSES	
PROGRAM	No.	%
Specific Ed. Goals		
Yes	74	87✓
No	7	8
No Response	4	5
Primary Goal		
Soc.-Emo.	55	65✓
Phy.-Dev.	1	1
Lang.-Dev.	9	11
Read.-Readiness	8	9
Math	—	—
Other	8	9
No Response	4	5
Order of Importance	31	36✓
Soc.-Emo./P.D./...	3	4
Lang. Dev./S-E/...		
RR/LD/...	1	1
PD/S-E/...	1	1
Math/RR/...	—	—
No Response	4	5
*Other	45	53
Grouping of Children		
Age	31.5	37✓
Sex	—	—
Ability	17	20
Cross-Aged	17.5	20
Other		
No Response	20	23
Adult/Child Ratio		
2½-3yr. 1 adult/5 Children	63	74✓
2½-3yr. 1 adult/8 Children	13	15
No Response	9	11
3-4 yr. 1 adult/5 Children	48.5	57✓
3-4 yr. 1 adult/10 Children	24.5	29
No Response	12	14
4-5 yr. 1 adult/7Children	38.5	45✓
4-5 yr. 1 adult/12 Children	34.5	41
No Response	12	14
2½-5 yr.1 adult/5 Children	60	71✓
2½-5 yr.1 adult/10 Children	10	12
No Response	15	17

*SE/LD 17 / RR/M - 2 / SE/CR - 7 / LD/other - 7 / Other 12

TABLE VII
CONTINUED

N = 85

AREAS PROGRAM	RESPONSES No.	 %
§Factors Aff. Eq. Pur.		
Hard Equipment	1	1
Manipulative Mat.	4	2
Age-Ability	33	19
Need	7	4
✓Safety	41	22
✓Sturdiness & Quality	36	20
Commercial Programs	—	—
✓Use	47	26
Number of Children	1	1
No Response	4	2
Cost	3	2
Other	1	1
Trips		
Yes	85	100✓
No	—	—
No Response	—	-
Frequency		
1/wk.	3	4
1/mo.	23	27✓
2/mo.	16	19
Often	11	13
No Response	29	33
Other	3	4
Types		
Educational	26	29
Fun	3	3
Appropriate	4	4
Zoo, Museum, Bakery...	48	53✓
No Response	10	11

TABLE [illegible]
CONTINUED

N = 95

AREAS	RESPONSES	
STAFF	No.	%
Qual.: Center Dir.		
2yr. College in Ch. Dev.	14	15
2 yr. College in Ch. Dev & Bus. Ad.	12	12
B.S. or B.A. in Bus. Admin.	7	7
B.S. or B.A. in Ele. Ed.	—	—
B.S. or B.A. in Ch. Dev. or Ele. Ed.: ECE	41	42✓
Other	15	16
No Response	8	8
Qual.: Ed. Dir.		
2 yr. College Ch. Dev.	7	7
B.S. or B.A. in Ch. Dev.	21	22
B.S. or B.A. in Ele. Ed.: ECE	49	62✓
Other	11	12
No Response	7	7
Minimal Qual.: Teacher		
2 yr. College in Ch. Dev.	36	34✓
B.S. or B.A. in Ch. Dev.	18	17
B.S. or B.A. in Ele. Ed: ECE	34	32
Other	12	11
No Response	6	6
Qual.: Teacher's Asst.		
Educational		
High or Some College	61	64✓
None	3	3
No Response	17	18
Exper	15	15
Personal		
Ability to work with staff, parents and children	23	24
Like Children	29	30✓
Willingness to Learn	4	4
Interest and Understanding of Children	20	21
No Response	20	28
Health	2	2

TABLE ~~VII~~
CONTINUED

N = 95

AREAS	RESPONSES	
STAFF	No.	%
Other Staff Members		
Dietician	4	3
Speech Path.	–	–
Nurse	18	12 ✓
Social Worker	6	4
Child Psych.	19	9
Doctor	6	4
Play-Monitor	1	1
Parent Asst.	11	7
Cook	16	10 ✓
Maintenance	18	11 ✓
Neighborhood Vol.	10	6
Elderly Vol.	6	4
No Response	39	24
Sec.	4	3
Ed. Consultant	3	2
Staff Training Programs		
Workshops & In-Service Training in Ch. Dev., ECE, Bi-ling...	50	46 ✓
Course Work at College Level	17	16
Metings :Goals and Objectives	16	15
Observe Other Centers	8	7
Professional Library	5	5
No Response	10	9
Other	3	2

TABLE VII
CONTINUED

AREAS	RESPONSES	
EMER.-HEALTH-FOOD	No.	%
Policies		
Insur. For Children & Staff	—	—
Annual Physical Re. (Staff)	1	1
Annual Physical re. (Stud.)	1	1
First Aide Knowledge (Staff)	8	9
Emergency Forms on File	47	51 ✓
Family & Child's Health His.	—	-
Yearly Eq. Check	—	-
Meet State & Local Fire & Health Codes	—	-
Drug Administration	1	1
For Ill Children	1	1
No Response	30	33
forms on Staff	3	3
Procedures		
Fire Drill	6	7
Daily Health Check	—	-
Emergency Plan	54	60 ✓
First Aide Steps	6	7
Food Storage & Prep.	—	-
No Response	23	25
Insur on Child	1	1
3 Annual Health Services Provided		
None	4	2
✓Dental Exam	29	18
Physical	20	12
✓Vision Screening	39	24
✓Hearing Exam	38	23
Psych. Testing	2	1
Diagnostic Ev. for Dev. Dis.	6	4
No Response	15	9
Other	10	7
Center Coop. Other Comm. Ag.		
Yes	72	90 ✓
No	8	10
Referral Center	34	32
Location:Ser. Brought in	61	57 ✓
Other	7	6
No Response	5	5

N = 85

TABLE VII
CONTINUED

AREAS	RESPONSES	
EMER.-HEALTH-FOOD	No.	%
Food		
Number Meals Served		
1-2 Snacks	25	29
2-2 Snacks	46	55✓
3-2 Snacks	2	2
No Response	6	7
Other	6	7
Menu		
Snacks: Meet Nut. Re.	48	31
Lunch: Meet Nut. Re.	53	34
No Response	27	17
Breakfast	29	18
Payment		
Parent Fees	14	16
Federal-State Subsidy	27	31
Both	41	49✓
Other	1	1
No Response	3	3
Food Costs		
2.50/wk.	6	7
3.75/wk.	19	23✓
5.00/wk.	18	21
6.25/wk.	14	16
Other	13	15
No Response	15	18
Factors Included in Figure		
Nutritional Requirements	28	31✓
Serving Utensils	—	-
Cook's Salary	1	1
Kitchen Facilities	—	—
Rising Food Costs	12	13
No Response	42	48
Other	6	7

TABLE XII
CONTINUED

N = 85

AREAS	RESPONSES	
FINAL POINTS	No.	%
Parental Role		
Interest & Knowledge of Goals	24	21
Cooperative	33	28✓
Supportive	20	17
Provide Input: Goals & Staff Selections	14	12
Establish Goals for Own Child	2	2
Establish the Center's Goals	2	2
No Response	22	18
Type of Evaluation		
Staff	6	7
Director's	8	9
Parental	4	5
Outside	11	13
All	21	25
Other	1	1
★Combinations	29	34✓
No Response	5	6
Center Best Meeting Parent's Needs		
Headstart	3	3
Private Large Day Care Corp.	4	4
Privately Owned & Operated	10	10
Nonprofit, Privately Owned	10	10
Nonprofit, Community Center	28	28✓
Parent-Coop.	30	31✓
Other	6	6
No Response	8	8
Center's Most Important Char.		
Staff Interest & Care	19	22✓
Staff Dedication	6	7
Staff's Qualifications	7	8
Teachers	6	7
Educational Pro.	6	7
Director	—	–
Food	—	–
★Other	26	29
No Response	18	20
✓Child Rec. -12/ Area-3/ Surroundings-3/ Equip-3/ 24 Hrs-3/ St-Child Ratio-2		
Parental Pre. : Infant - Toddler Care		
Profess. Trained Child Set.	14	15
Infant-Toddler Center	13	14
Home Care Center in Neigh.	36	38✓
Parent-Coop	13	14
Other	4	3
No Response	15	16

★ St-Par - 12/ St-Dir -4/ S-D-P-6 / Dir-P -6 Other-1

APPENDIX E

Detroit Survey 88% Return
Black + white Middle Class Parents N=8

Please answer the questionnaire as though you had been given unlimited financial resources to create a quality child care center.

THE CHILD CARE CENTER

1. What should the primary functions of the center be?
(Rank in order of importance: 1-Most important—4 Least important.)

6 Child Development 1st
1 Custodial Care
1 Readiness for School
___ Other ____________ Please Specify

CD/SR/O = 3 / CD/CC = 1 / CD-S-Emo. = 1 / CC/CD = 1 / S-R/CD = 1 / Other = 1

2. List the aspects of a child care center which you consider to be important.

Indoor (size of the room, appearance, etc.)
Size - 7 / Cleanliness - 2 / Equipment - 3 / Appearance - 2 / Sturdy - 1 / Safety - 1

Outdoor (appearance, climbing materials, etc.)
Appearance - 1 / Equipment - 5 / Size - 8

3. How should the center be funded?

___ Parent Fees
___ Scholarships
___ Other Combinations 2 Please Specify
2 Federal-State Tuition Payments
4 Parental payment based upon a sliding scale according to income with the Federal-State Governments paying the remainder

4. Who should determine how the money is spent? (Parent Response Optional)

1 Board of Directors
1 Parent-Advisory Board
___ Financial Administrator
4 Educational Director
___ Other Combinations - 1 Please Specify

0 Res. - 1

PROGRAM

1. Should the child care center have specific educational goals? Yes ___ No
If yes, rank according to degree of importance (1-Most imp.—7 Least).

2 Language Development
1 Reading Readiness
- Math
___ Creativity
___ Physical Development
4 Social & Emotional Development
___ Other ____________ Please Specify

0 Res. - 1

2. How should the children be grouped?

2 Age
___ Sex
2 Cross-Aged
1 Ability
___ Other Combinations - 2 Please Specify

0 Res. - 1

3. What should the adult/child ratio be?

7 2½-3 yr. olds a 1 adult/5 children
1 2½-3 yr. olds 1 adult/8 children

5 3-4 yr. olds 1 adult/5 children
3 3-4 yr. olds 1 adult/10 children

4 4-5 yr. olds 1 adult/7 Kids
4 4-5 yr. olds 1 adult/12 Kid

5 2½-5 yr. olds 1 adult/5 Kids
2 2½-5 yr. olds 1 adult/10 Kids

0 Res. - 1

Safety
4

4. What should be considered when purchasing equipment?

Sturdiness - Quality / Cost / Use / Age / # of Kids
4 / 1 / 6 / 3 / 1

Enjoyment
1

5. Should the children go on field trips? 8 Yes - No

If yes, what type and how often?

1/mo. -2
1/wk. -3
2/mo. -1

0 Res.- 2

Community places, zoo, farm
7

0 Res. -1

STAFF

1. What qualifications should the ~~Executive~~ Center Director have?(Parent Res. Op.)

___2 yr. College in Child Dev.
7 2 yr. College in Child Dev. and Business Administration
4 B.S. or B.A. in Child Dev./ Ele. Ed.: Early Child. Ed.
___B.S. or B.A. in Bus. Admin.
1 B.S. or B.A. in Elementary Ed.
___Other ______________
Please Specify

2. What qualifications should the Educational Director have?

2 2 yr. College in Child Dev.
___B.S. or B.A. in Child Dev.
6 B.S. or B.A. in Ele. Ed.:Early Childhood Ed.
___Other ______________
Please Specify

3. What type of minimal training should the Teacher have?

7 2 yr. College in Child Dev.
___B.S. OR B.A. in Child Dev.
___B.S or B.A. in Ele. Ed.:EARLY CHILDHOOD ED.
___Other ______________
Please Specify

0 Res. -1

4. What qualifications should the Teacher's Assistant have?

0 Res.-1

Educational
Some College or High School 7

Personal
Warm, Kind, Interest, Understand and like children -7

5. List other staff members which you feel should be part of the center.

Professional
Referral
Nurse -2
Doctor -2
Counselor -2
Soc. Worker -2
Dieticitian -2
File Clerk -1

Non-Professional
Janitor -2
Parents -1
Art Students -1
Grandparents -1

6. What type of training programs should the center have for its staff?

Meetings - 2
College Work -1
In-Service -6
Observe other centers -1

EMERGENCY-HEALTH-FOOD

1. What should the emergency policies and procedures of a child care center be?
Specific Forms -8 First Aid -1
Specific Plan -8

2. What annual health services should the center provide?
Vision- Hearing 6 Physical 3 Immunizations 3 Speech 1 Dental 2

3. Should the center cooperate with other community agencies? 7 Yes 1 No

If yes, in what capacity?

5 As a referral center for parents

3 As a location where other services can be brought: health examination dental examine and care, screening for vision & hearing, etc.

– Other ______________________
Please specify

4. How many meals should be served at the center?
2 Meals + 2 Snacks -5 / 1 Meal + 2 Snacks -3

5. List a menu (including snacks & meal(s)) for one day.
Met Requirements

6. How should the lunches be paid for?

2 Parent Fees

1 FEDERAL-STATE SUBSIDY

5 Both

___ Other ______________________
Please specify

7. How much money should be spent per child/week on food?

___ $2.50/child/wk.

2 $3.75/child/wk.

1 $5.00/child/wk.

4 $6.25/child/wk.

___ Other Need -1
Please specify

What factors should be included in this rate?
Nutritional Requirements -4
Cook's Salary + Food -1
0 Res. -3

FINAL POINTS

1. What role should parents play in the educational program?
Cooperative -7
None (Depending on Dir. Qualifications) -1
Input - 2
Limited -1

2. What type of an evaluation system should the center have?

__Staff evaluation of the total program

3 Dirtector's evaluation of the center's ability to meet stated

1 Parent evaluation of the total services provided

__Outside evaluation of the total program

__Other All- 3 / Combination -1

3. What type of a child care center best meets your needs?(PARENT ON

__Headstart Program (½ Day)

__Private large day care corporation

1 Privately owned &operated child care center

4 Nonprofit , private child care center

__Nonprofit Community child care center

2 Parent-Cooperative child care center

__Other____________________
Please specify

4. What do you consider to be the single most important characterist of a quality child care center?

Meets Child's Total Needs - 3
School Readiness -1

Emo. - Phy. Dev. -1
Teacher -1
Atmosphere -1
0 Res. -1

EXTRA!!!

What type of infant-toddler care would best suit your needs?(Parent O

1 Professionally trained child sitter

1 Infant-Toddler Center for children 6weeks-2½yr.

3 Home Care Center located in the neighborhood

1 Parent-Cooperative

__Other____________________
Please specify

0 Res. -2